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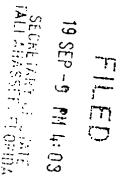
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	IAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	

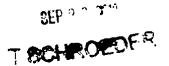
Office Use Only



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COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJI	Admirals Walk Condominium A	Association,	Inc.	
DOCU	MENT NUMBER:			
The en	closed Statement of Change of Registered Office	/Agent and fee a	are submitted for filing.	
Please	return all correspondence concerning this matter	to the following	:	
	Thomas Bangerter			
	Name of Cont	act Person		
Admirals Walk Condominium Association, Inc.				
Firm/Company				
5751 Soldier Circle				
Address				
Sarasota, FL 34233				
City/State and Zip Code				
admiralswalk2@comcast.net				
E-mail address: (to be used for future annual report notification)				
For fur	ther information concerning this matter, please ca	all:		
Thor	nas Bangerter Name of Contact Person	941	921-4119	
	Name of Contact Person	Area Code	& Daytime Telephone Number	
Enclos	ed is a \$35.00 check made payable to the Departr	nent of State.		
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amen Divisi Cliftor	Address: dment Section on of Corporations n Building Executive Center Circle	
	Tananassee, FL 32314		assee, FL 32301	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Admirals Walk Condominium Association, Inc.
2. The principal office address: 5751 Soldier Circle
Sarasota, FL 34233
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 05/13/2005 Document number: N05000005070
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Joshua Jones
5751 Soldier Circle
Sarasota, FL 34233
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Thomas Bangerter
Thomas Bangerter 5751 Soldier Circle
P.O. Box NOT acceptable
Sarasota, FL 3 433 34233
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
James Powell, President
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. Signature of Registered Agent If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314