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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Fairway Preserve at Olde Cypress Condominium Association, Inc. (Name of Corporation)
DOCUMENT NUMBER: N05000007322
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Arthur Moore
(Name of Contact Person)
c/o Fairway Preserve Condo Assoc (Firm/Company)
(Firm/Company)
7995 Preserve Circle (Address)
(Address)
Naples, FL 34119
(City/State and Zip Code)
For further information concerning this matter, please call:
Arthur Moore at (239) 598-2034 877 - 4174 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Evecutive Center Circle

Tallahassee, FL 32301

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

statement of change is su	ubmitted for a corporation orga	502, 607.1508, or 617.1508, Flor anized under the laws of the State stered agent, or both, in the State	of
1. The name of the corpo	oration: Fairway Preserve at O	Ide Cypress Condominium Assoc	ciation, Inc.
2. The principal office ac	ddress: 7995 Preserve Circle		
	Naples, FL 34119		
3. The mailing address (if different):		
4. Date of incorporation	qualification: July 18, 2005	Document number: N05	000007322
5. The name and street a Florida Department of		agent and registered office on fil	e with the
Robin	D. Hopper		
c/o Talon Management & Realty		2008 SE TAL	
7995	Preserve Circle, Naples, I	FL 34119	AUG (
6. The name and street a (if changed):	ddress of the new registered ag	ent (if changed) and /or registered	SECRETARY OF STATE SECRETARY OF STATE OR ID
Arthu	r Moore		
c/o Fa	airway Preserve Condo /	Assoc	IDA V
	(P.O. Box NOT acceptab		
7995	Preserve Circle, Naples	, FL 34119	
The street address of its as changed will be iden	s registered office and the street tical.	et address of the business office	of its registered agent,
Such change was authorized by the board	rized by resolution duly adopt l, or the corporation has been	ted by its board of directors or b notified in writing of the change	y an officer so
Marchen (Signature of an of	Mer or director)	Matthew Liguori, Presider (Printed or typed nam	
I Jurther agree to comp of my duties, and I am j document is being filed	pointment as registered agent of ly with the provisions of all standing with the provisions of all standing the of merely to reflect a change in otified in writing of this change.	and agree to act in this capacity atutes relative to the proper and bligation of my position as regis the registered office address, I i ge.	i i complete performance stered agent. Or, if this hereby confirm that the
Signature of	Registered Agent)	8/20/08 (Date)	7
If signing on behalf of	an entity:	•	
ARTH	TINED Name)		

* * * FILING FEE: \$35.00 * * *