

ND50000008289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

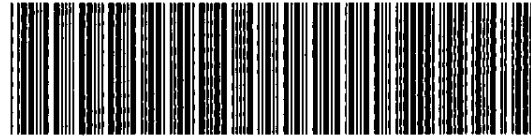
(Business Entity Name)

(Document Number)

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12/27/11--01001--005 **35.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
FILED
12 JAN 18 AM 8:57

Amend
C.COULLETTE

JAN 19 2012

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: VAN LOON BUSINESS PARK CONDOMINIUM OWNERS ASSOCIATION, INC.

DOCUMENT NUMBER: N05000008289

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GENE R. BRACHER
Name of Contact Person

SUNSHINE REALTY OF SW FL, INC.
Firm/ Company

234 DEL PRADO BLVD N. UNIT 4
Address

CAPE CORAL, FL 33909
City/ State and Zip Code

G.BRACHER@SUNSHINEREALTYOFSWFL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GENE R. BRACHER at (239) 910 6003
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status enclosed)
- \$43.75 Filing Fee & Certified Copy (Additional copy is (Additional Copy
- \$52.50 Filing Fee & Certificate of Status Certified Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 28, 2011

GENE R. BRACHER
SUNSHINE REALTY OF SW FL, INC.
234 DEL PRADO BLVD. N., UNIT 4
CAPE CORAL, FL 33909

SUBJECT: VAN LOON BUSINESS PARK CONDOMINIUM OWNER'S
ASSOCIATION, INC.
Ref. Number: N05000008289

We have received your document for VAN LOON BUSINESS PARK
CONDOMINIUM OWNER'S ASSOCIATION, INC. and check(s) totaling \$35.00.
However, the enclosed document has not been filed and is being returned to you
for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes
(chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit
corporation, this document should be filed pursuant to chapter 617, Florida
Statutes.

Please return your document, along with a copy of this letter, within 60 days or
your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call
(850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 511A00028696

*Sent back on Jan 9 - need
correct adopt.*

RECEIVED

12 JAN -6 AM 9:15

TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

Jan. 9, 2012
~~December 28, 2011~~

GENE R. BRACHER
SUNSHINE REALTY OF SW FL, INC.
234 DEL PRADO BLVD. N., UNIT 4
CAPE CORAL, FL 33909

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(850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 511A00028696

** you must use the page 4 of 4 for
the non-profit adoption - this one
will not work*

RECEIVED

12 JAN 18 AM 10:01

TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

VAN LOAN BUSINESS PARK CONDOMINIUM OWNER'S ASSOCIATION, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

N 05000008289

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

234 DEL PRADO BLVD N.
UNIT 4
CAPE CORAL, FL 33909

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

234 DEL PRADO BLVD N.
UNIT 4
CAPE CORAL, FL 33909

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

N/A

(Florida street address)

New Registered Office Address:

_____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 18 AM 8:57

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

Change PT John Doe
 Remove V Mike Jones
 Add SV Sally Smith

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--|--------------|--------------------------|---|
| 1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>PD</u> | <u>WAYNE A. FITCH</u> | <u>2033 SE 21ST LANE</u> <u>CAPE CORAL, FL</u> <u>33990</u> |
| 2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>P</u> | <u>GIANLUCA MELE</u> | <u>413 NE VAN LOON LANE</u> <u>UNIT 103+104</u> <u>CAPE CORAL, FL 33909</u> |
| 3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>VD</u> | <u>LON C. ELLIOTT II</u> | <u>2304 SE 19TH PLACE</u> <u>CAPE CORAL, FL</u> <u>33990</u> |
| 4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>V</u> | <u>JOHN SAWYER</u> | <u>413 NE VAN LOON LANE</u> <u>UNIT 107</u> <u>CAPE CORAL, FL 33909</u> |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>SD</u> | <u>LARRY VAHUE</u> | <u>2033 SE 21ST LANE</u> <u>CAPE CORAL, FL</u> <u>33990</u> |
| 6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>S</u> | <u>DAIN PERRY</u> | <u>20300 HASKIN RD.</u> <u>N. FORT MYERS, FL</u> <u>33917</u> |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
 (Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:
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Example:

Change PT John Doe
 Remove V Mike Jones
 Add SV Sally Smith

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--|--------------|----------------------|---|
| 1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>TD</u> | <u>THOMAS TEUFEL</u> | <u>2033 SE 21ST LANE</u> <u>CAPE CORAL, FL</u> <u>33990</u> |
| 2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>T</u> | <u>JODI TANNER</u> | <u>413 NE VAN LOON LANE</u> <u>UNIT 102</u> <u>CAPE CORAL, FL 33909</u> |
| 3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | _____ | _____ | _____ |
| 4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | _____ | _____ | _____ |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | _____ | _____ | _____ |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | _____ | _____ | _____ |

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

TO AMEND ARTICLE VI ADDING SECTION C.1

C.1 AT THE ASSOCIATION MEETING OF THE MEMBERS
(UNIT OWNERS) ON DECEMBER 15, 2011 IT WAS
UNANIMOUSLY VOTED TO PASS THE RESOLUTION
TURNING OVER CONTROL OF THE ASSOCIATION TO
THE MEMBERS FROM THE DEVELOPERS AND TO
ELECT A NEW BOARD OF DIRECTORS FROM THE
CURRENT MEMBERS (UNIT OWNERS).

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:**
(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: DECEMBER 15, 2011

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 12/16/11

Signature Wayne A Fitch

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

WAYNE A FITCH
(Typed or printed name of person signing)

Pres.
(Title of person signing)