

no5000009660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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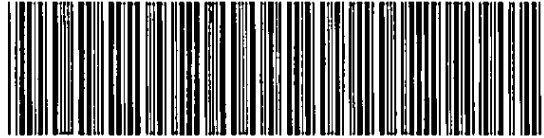
(Business Entity Name)

(Document Number)

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2018 MAY 21 P 11 30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 22 2013

T. LEWIS

AND

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cape Coral Cove Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N05000009660

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:

Karla Marquez, LCAM
Name of Contact Person

Cape Coral Cove Condominium
Firm/Company

1751 Four Mile Cove Pkwy
Address

Cape Coral, FL 33990
City/State and Zip Code

coralcovemgr@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karla Marquez, LCAM at (239) 772-4539
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 Executive Center Circle
Tallahassee, 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: Cape Coral Cove Condominium Association, Inc.
2. The principal office address: 1751 Four Mile Cove Parkway, Cape Coral, FL 33990

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 09/19/2005 Document number: N05000009660

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)

Condo & HOA Law Group, PLLC

1751 Four Mile Cove Parkway

Cape Coral, FL 33990

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Richard D. DeBoest, Esq.

Goede, Adamczyk, DeBoest & Cross, PLLC

P.O. Box NOT acceptable

2030 McGregor Blvd., Fort Myers, FL 33901

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 this change.

[Signature]
Signature of officer or director

MARTIN B. GELLER SECRETARY/TREASURER
Printed or typed name and title

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]
Signature of Registered Agent

5-17-18
Date

If signing on behalf of an entity:

RICHARD D. DEBOEST
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

CR2E045 (03/12)