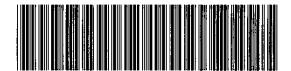
## N05000010905

(Re	equestor's Name)		
. (Ad	dress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: Tuscany by the Sea Condominium Association, Inc. (Name of Corporation)				
(, ,	o. corporation)			
DOCUMENT NUMBER: N05000010905				
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:				
Drian Corridh				
Brian Smith	f Contact Person)			
(Name o	of Contact Person)			
Rampart Properties, Inc				
(Fir	m/Company)			
9887 Fourth Street N Suite	#301			
	(Address)			
Saint Petershurg EL 33702				
Saint Petersburg FL 33702 (City/State and Zip Code)				
• • • • • • • • • • • • • • • • • • • •				
For further information concerning this matter, ple	ease call:			
Brian Smith	. <b>797</b>			
(Name of Contact Person)	at ( 727 ) 577-2200 (Area Code & Daytime Telephone Number)			
(Traine of Contact Folson)	(Thea code & Baytime Telephone (Tambel)			
Enclosed is a \$35.00 check made payable to the Department of State.				
Enclosed is a \$55.00 check made payable to the E	opartment of state.			
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporation				
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
	Tallahassee, FL 32301			

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

statement of char	provisions of sections 607.0502, 617.0502, 60 nge is submitted for a corporation organized i r to change its registered office or registered o	under the laws of the State of Florida	_
	he corporation: Tuscany by the Sea Condom	,	
	office address: 19520 Gulf Blvd. Indian Shore		
3. The mailing ad	ddress (if different): 9887 Fourth Street N S	Guite #301, St Petersburg FL 33702	
4. Date of incorpo	oration/qualification:		
5. The name and Florida Depart	street address of the current registered agent atment of State:	and registered office on file with the	
	Robert A Babcock		<u> </u>
	11350 66th St N #124	10	
	Largo FL 33733	DEC -	主
6. The name and (if changed):	street address of the new registered agent (if	changed) and /or registered office	A CHANGE
	Rampart Properties, Inc		
_	9887 Fourth Street N Suite #301	<u> </u>	<del></del>
	(P.O. Box NOT acceptable)		
-	Saint Petersburg FL 33702		
The street address as changed will be	ss of its registered office and the street addressed be identical.	ress of the business office of its registered age	nt,
Such change was authorized by the	s authorized by resolution duly adopted by e board, or the corporation has been notified	its board of directors or by an officer so	
Lini	re of an officer or director)	Kevin Pawlowski	_
,	· · · · · · · · · · · · · · · · · · ·	ree to act in this capacity. relative to the proper and complete performa ion of my position as registered agent. Or, if I gistered office address, I hereby confirm that I	nce this the
3,	nature of Registered Agent)	/1- 22-/0	_
	•	(Date)	
If signing on beh	•		
BRIAN	yped or Printed Name)		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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