

N05000011318

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

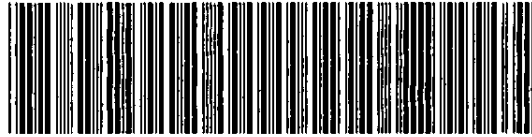
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300163999483

12/30/09--01025--027 **245.00

FILED
2009 DEC 30 AM 10:18
CLERK OF STATE
TALLAHASSEE, FLORIDA

R.A.

TB

JAN - 4 2010

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Meadow of Key West Condominium Association, Inc.
2. The principal office address: 6435 Naples Blvd., Naples, FL 34109
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11-7-2005 Document number: N05000011318
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)

Resigned

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

Gary Carman, Esq.

GrayRobinson, P.A.

1221 Brickell Avenue

Miami, FL 33131

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC 30 AM 10:18

FILED

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.

Michael Carrigan, President

Signature of an officer or director

Michael Carrigan, President

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 provision 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.*

Gary M. Co
Signature of Registered Agent

Dec. 18, 2009
Date

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. Box 6327, TALLAHASSEE, FL 32314