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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LA Change  
Lewis  
6-22-10

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: FAIRWAY PALM II CONDOMINIUM ASSOCIATION  
Name of Corporation

DOCUMENT NUMBER: N05000012908

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:

CHARLOTTE CHURCHILL  
Name of Contact Person

BAYSHORE ASSOCIATION MGMT  
Firm/Company

430 NW LAKE WHITNEY PLACE  
Address

PORT ST. LUCIE FL 34986  
City/State and Zip Code

judybayshore@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHARLOTTE CHURCHILL at (772) 370-4991 After 3pm  
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: FAIRWAY PALMS II CONDOMINIUM ASSOCIATION, Inc.
2. The principal office address: 6539 SE FEDERAL HWY  
STUART FL 34997
3. The mailing address (if different): 430 NW LAKE WHITNEY PLACE  
PORT ST LUCIE FL 34986
4. Date of incorporation/qualification: 2005 Document number: NO5000012908
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)

Deborah Ross

759 S Federal Hwy #212

STUART, FL 34994

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

William WEBER

430 NW LAKE WHITNEY PLACE

P.O. Box NOT acceptable

PORT ST. LUCIE FL 34986

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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.

Marta S. Lorenz  
Signature of an officer or director

MARTA S. LORENZ  
Printed or typed name and title

Secretary

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.

William T. Weber  
Signature of Registered Agent

6/15/10  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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