## N06000003265

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone #	9
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	· · · · · · · · · · · · · · · · · · ·
, ; (Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF SIAH

C.COULLIETTE
AUG 10 2009

**EXAMINER** 

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: The Sijtes at Sandparl Resort owners Association, I.
DOCUMENT NUMBER: N 060000 3265
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:
Robert L. Tan Kel, P. A. (Name of contact person)
(Firm/Company)
1022 Main Street, Suit D
Dunedn, Fl. 34698 (City/state and zip code)
For further information concerning this matter, please call:
Robert L. Tankel (Name of contact person)  at (727, 734 - 190) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

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## 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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: The Suites at Sanapar / RESTA owners ASSOCIATION, Inc.
2. The principal office address: 500 Mardalay Avenue, Clearweter, FL 3 3767
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/22/06 Document number: ND600003265
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Michael J. Cheezem
2201 Fourth Street North Sule 200
St Pelersburgh, FL 33704 Ex
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Robert L. Tankel, P.A.
1022 Main Street SUHED
Dunedin, FL 3468
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 coard of the change.
Robert 2 Tankol, Ros
(Signature of an officer or director) (Printed or typed name and title)  I hereby accept the appointment as registered agent and agree to act in this capacity
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 megely to reflect a change in the registered office address, I hereby confirm that the corporation has been confired in writing of this change.
8-4-09
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:  Robert L Tankel
(Typed or Printed Name)

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