

NO6 0000004777

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

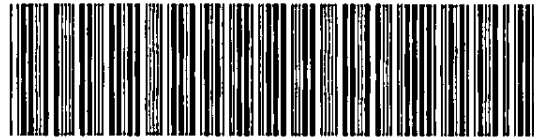
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SECRETARY OF STATE
TALLAHASSEE, FL 32311

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Vivante at Punta Gorda Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N06000004777

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:

Leah Voyles

Name of Contact Person

KWPMC

Firm/Company

3372 Woods Edge Cir Unit 101

Address

Bonita Springs, FL 34134

City/State and Zip Code

vivantepg@kwpmc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leah Voyles

Name of Contact Person

at (941) 575-8239

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: Vivante at Punta Gorda Condominium Association, Inc.
2. The principal office address: 92 Vivante Blvd Punta Gorda, FL 33950
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/1/2006 Document number: N06000004777
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)

Palmer Property Management

6210 Scott St Ste 214

Punta Gorda, FL 33950

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

KWPMC

3372 Woods Edge Cir Unit 101

P.O. Box NOT acceptable

Bonita Springs, FL 34134

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.

Patricia Baxter-Thornhill
Signature of an officer or director

PATRICIA BAXTER-THORNHILL
Printed or typed name and title
President Vivante COA

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.

Leah Voyles
Signature of Registered Agent

12/9/2021 1/13/2022
Date

If signing on behalf of an entity:

Leah Voyles
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 (04/13)

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TALLAHASSEE, FL