

ND60000005432

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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19 JAN -7 AM 11:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 08 2019

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 20, 2018

MARYANN SYRASKI
COASTAL MANAGEMENT
PO BOX 1407
PORT RICHEY, FL 34673

SUBJECT: HARBOR COLONY CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N06000005432

We have received your document for HARBOR COLONY CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We can find no record of the entity named in your document. A computer printout of a similar named entity is enclosed for your review. If this is the right name, please correct your document and return it for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 318A00026115

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Harbor Colony AT GULF LANDINGS CONDO
Name of Corporation

DOCUMENT NUMBER: N06000005432

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:

MaryAnn Syraski

Name of Contact Person

Coastal Management

Firm/Company

P.O Box 1407

Address

Port Richey FL 34673

City/State and Zip Code

acctcoastalhoamgt@gmail.com

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

For further information concerning this matter, please call:

Mike Ywaniw

Name of Contact Person

at (516) 427-6040

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: HARBOR COLONY CONDOMINIUM ASSOCIATION, INC. S. 17C
2. The principal office address: 6454 Ridge Rd Port Richey FL 34668

3. The mailing address (if different): Listed above 1st page

4. Date of incorporation/qualification: October 1, 2018 Document number: N06000005432

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)

5775 elisabethan lane
new port richy, FL 34652

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

Coastal Hoa Management Serv inc
6454 Ridge Rd
Port Richey FL 34668

P.O. Box NOT acceptable

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19 JAN -7 AM 11:48
STATE
TALLAHASSEE, FLORIDA

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.

[Signature]
Signature of an officer or director

Tere Gulao
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 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.

[Signature]
Signature of Registered Agent

12/4/18

Date

If signing on behalf of an entity:

MaryAnn Syraski

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 (03/12)