

ND6000009718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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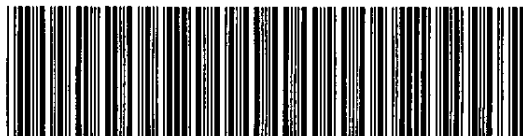
(Business Entity Name)

(Document Number)

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AUG 17 2015

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Bayboro Tower Condominium Association  
Name of Corporation

**DOCUMENT NUMBER:** NA6000009718

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:

Sue Lamont  
Name of Contact Person

Lamont Management  
Firm/Company

250 104th Avenue  
Address

Treasure Island, FL 33706  
City/State and Zip Code

Stephanie@lamontmanagement.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Hendrix at (727) 360-3644  
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: Bayboro Tower Condominium Association, Inc.
2. The principal office address: 210 5<sup>th</sup> Avenue South  
St. Petersburg, FL 33701
3. The mailing address (if different): 250 104<sup>th</sup> Avenue  
Treasure Island, FL 33706
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: NO6000009718
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)

Leland Management  
6972 Lake Gloria Blvd  
Orlando, FL 32809

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

Sue Lamont/Lamont Management  
250 104<sup>th</sup> Avenue  
P.O. Box NOT acceptable  
Treasure Island, FL 33706

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.

Dylan Moore

Signature of an officer or director

DYLAN MOORE, Treasurer

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.

Sue Lamont

Signature of Registered Agent

08/11/15

Date

If signing on behalf of an entity:

SUE LAMONT

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