

ND70000004443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

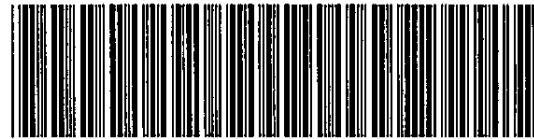
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JAN 05 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AMASON Condominiums, Inc.
Name of Corporation

DOCUMENT NUMBER: NO700000 4443

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:

ANNE LINDSEY
Name of Contact Person

AMASON Condominiums, Inc
Firm/Company

P.O. Box 290
Address

LAKE WORTH, FL 33460
City/State and Zip Code

FCAMPION@BELL SOUTH.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANNE LINDSEY at (561) 827-8621
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: AMASON CONDOMINIUMS, INC.
2. The principal office address: 1000 10th AVENUE SOUTH
LAKE WORTH, FL 33460
3. The mailing address (if different): P.O. BOX 290
LAKE WORTH, FL 33460
4. Date of incorporation/qualification: 5/2/07 Document number: 1407000004443
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)

407.492,
5850
Arthur
Torvela

ARTHUR TORVELA (RESIGNED IN 2012)
430 SOUTH C STREET
LAKE WORTH, FL 33460

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

ANNE LINDSEY
150 LAKE MERYL DR. #240
P.O. Box NOT acceptable
WEST PALM BEACH FL 33411

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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.

Anne Lindsey
Signature of an officer or director

ANNE LINDSEY Sec.
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.

Anne Lindsey
Signature of Registered Agent

12-36-16
Date

If signing on behalf of an entity:

ANNE LINDSEY
Typed or Printed Name

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