

No8023

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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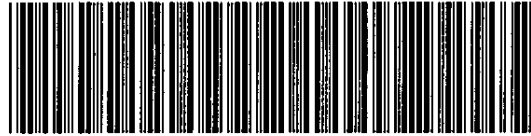
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

C. LEWIS
OCT 4 2013
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Island Vista Estates Homeowners Association Inc
Name of Corporation

DOCUMENT NUMBER: N08023

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:

Cindy Groat
Name of Contact Person
Island Vista Estates Homeowners Asso.
Firm/Company
568 Leopard Lane
Address
North Fort Myers, FL 33917
City/State and Zip Code
Clindra@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cindy Groat at (603) 567-9798
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: Island Vista Estates Homeowners Association Inc
2. The principal office address: 3000 North Tamiami Trail
North Fort Myers FL 33903
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/07/1985 Document number: N08023
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)

Ann M Johnson

201 Eland Dr

North Fort Myers FL 33917

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

Cindy Grout
568 Leopard Lane

P.O. Box NOT acceptable

North Fort Myers, FL 33917

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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.



Signature of an officer or director

Marie V. Tucker President

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.

Cindy L Grout
Signature of Registered Agent

9/10/13
Date

If signing on behalf of an entity:

-IVE HOA Cindy Grout
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)