

N08309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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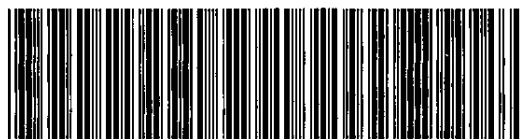
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TB

SEP 22 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lake Edge Estates Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N08309

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:

Jerry D. Brooks
Name of Contact Person

J Brooks & Associates, Inc.
Firm/Company

2804 Del Prado Blvd. S., #109
Address

Cape Coral, FL 33904
City/State and Zip Code

paula-smith@jbrooksai.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paula R. Smith at (239) 540-0163
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: Lake Edge Estates Condominium Association, Inc.
2. The principal office address: J Brooks & Associates, Inc.
2804 Del Prado Blvd. S., #109 - Cape Coral, FL 33904
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 03/21/1985 Document number: N08309

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)

Susan Kase
American Condo Mgmt., Inc.
615 Cape Coral Parkway W., #103
Cape Coral, FL 33914

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

J Brooks & Associates, Inc.

2804 Del Prado Blvd. S., #109

P.O. Box NOT acceptable

Cape Coral, FL 33904

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.

Susanna Thompson SUSANNA THOMPSON
Signature of an officer or director Printed or typed name and title
Director

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.

Jerry D. Brooks
Signature of Registered Agent

09/09/2010

Date

If signing on behalf of an entity:

Jerry D. Brooks

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

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2010 SEP 22 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA