

N10494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

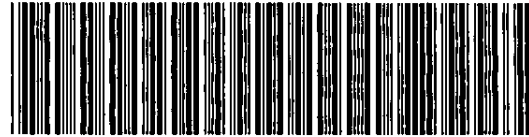
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600253142656

10/28/13--01018--010 **35.00

RECEIVED
13 NOV - 1 PM 4 50
SECRETARY OF STATE
2013 NOV 28 11:00 AM

RA Chang
11/4/13
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Condominium Association of Waterside II, Inc
Name of Corporation

DOCUMENT NUMBER: N104921

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:

Coleen Verdon, LCAM
Name of Contact Person

Resource Property Mgmt.
Firm/Company

28100 US Hwy 19 N, Suite 205
Address

Clearwater, FL 33716
City/State and Zip Code

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

For further information concerning this matter, please call:

Coleen Verdon at 727, 796-5900 ex 2122
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

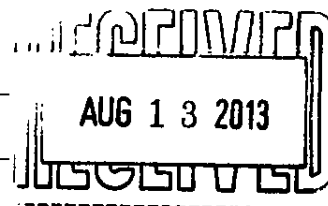
Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Condominium Association of Waterside II, Inc
2. The principal office address: 28100 US Hwy 19, N. Suite 205
Clearwater, FL 33761
3. The mailing address (if different): _____

4. Date of incorporation/qualification: July 31, 1985 Document number: N102194

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)

Janet Winfield
9300 N. 16th Street
Tampa, FL 33612



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

Steven Mezer
220 S. Franklin St Tampa
FL, 33602

P.O. Box NOT acceptable

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

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.

[Signature]
Signature of Registered Agent

9/25/13
Date

If signing on behalf of an entity:

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