

N12147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

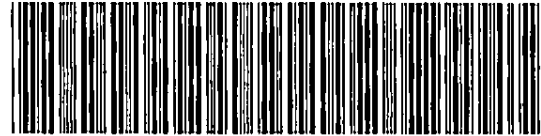
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: South Bridge Park Condominium Assoc., Inc., No. 2
Name of Corporation

DOCUMENT NUMBER: N12147

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:

Sharon S. Vander Wulp, Esq.
Name of Contact Person

Sharon S. Vander Wulp, P.A.
Firm/Company

712 Shamrock Blvd.
Address

Venice, FL 34293
City/State and Zip Code

jackie@keys-caldwell.com
E-mail address: (to be used for future annual report notification)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
17 JUL 28 PM 4:53

For further information concerning this matter, please call:

Jackie Wood at (941) 4088293
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: South Bridge Park Condominium Assoc., Inc., No. 2
2. The principal office address: 1525 Tamiami Trail S., Unit 603, Venice, FL 34285

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/18/1985 Document number: N12147

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)

Bruce H. Codville

1525 S. Tamiami Trail, #603

Venice, FL 34285

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

Thomas Whittaker

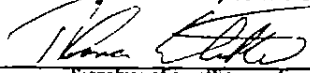
1525 S. Tamiami Trail, #603

P.O. Box NOT acceptable

Venice, FL 34285

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.

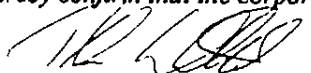


Signature of an officer or director

Thomas Whittaker, director

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 of Registered Agent

8-1-17

Date

If signing on behalf of an entity:

South Bridge Park Condominium Assoc., Inc., No. 2

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)

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