N12753

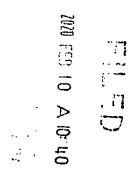
(Requestor's Name)
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, ,
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
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QM 3/5/20

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: SHOR! Name of Corporation	EWALK PALMS CONDOMINIUM AS on	SOCIATION, INC
DOCUMENT NU	MBER:	
The enclosed States	ment of Change of Registered Office	Agent and fee are submitted for filing.
Please return all co	rrespondence concerning this matter	to the following:
PHILIP ALEXANI	DER	
Name of Contact P	erson	
SHOREWALK PA	LMS CONDOMINIUM ASSOCIATION	R. INC
Firm/Company		
4502 46th Ave West		
Address		
Bradenton, FL 34210		
City/State and Zip	Code	
	shorewalkcondos2014@gmail.com	
E-mail address: (t	o be used for future annual report	notification)
For further informa	tion concerning this matter, please co	all:
Philip Alexander		at (941)896-3988 Area Code & Daytime Telephone Number
Nar	ne of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.0	0 check made payable to the Departi	nent of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (04/13)

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sange is submitted for a corporation organized under the laws of the State of $\frac{1}{2}$ or to change its registered office or registered agent, or both, in the State of Fi	lorida		
1. The name of t	the corporation: Shorewalk Palms Condiminium Association. Inc			
	office address: 4502 46th Ave W. Bradenton, FL 34210			
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 12/23/1985 Document number: N12753			
	d street address of the current registered agent and registered office on file wit rtment of State: (If resigned, enter resigned)	h the		
	Lucy Spoon (resigned)			
	4502 46th Ave W	ī	2020	
	Bradenton, FL 34210	<u>-</u>	2020 FEB	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offi	ice	10 A	, <u>, , , , , , , , , , , , , , , , , , </u>
	Philip Alexander	÷	Ö	
	4502 46th Ave W		0,40	
	P.O. Box NOT acceptable			
	Bradenton, FL 34210			
The street addre as changed will	ess of its registered office and the street address of the business office of its l be identical.	regist	tered age	nt.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an eleboard, or the corporation has been notified in writing of the change.	officer	so	
	CLAUDETTE LAST - Since of Jan officer or director CLAUDETTE LAST - Since of Jan officer or director CLAUDETTE LAST - Since of Laude and title or typed name and typed			
I hereby accept I further agree to of my duties, and document is belo corporation has	t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and com nd I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereb s been notified in writing of this change.	plete j. Lagent y confi	performa t. Or if t irm that t	nce his he
Phy 3	And 1/20/20 grature of Registered Agent Date			_
If signing on be	chalf of an entity:			
Ту	Typed or Printed Name			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

CR2E045 (04/13)