

N15099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

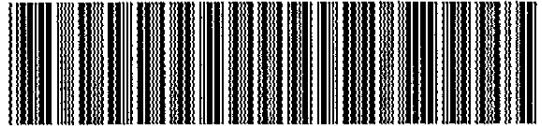
(Business Entity Name)

(Document Number)

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STATE OF ALABAMA
TALLAHASSEE, FLA

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T. Lewis 8/5/03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cross Creek of Ft. Myers Single Family Condominium^{II} Association, Inc.

(Name of corporation)

DOCUMENT NUMBER: N15099

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:

LoriAnn Ayers, CAM, CFPM

(Name of person)

P & M Property Management

(Name of firm/company)

15660 San Carlos Blvd. #40

(Address)

Ft. Myers, FL 33908

(City/state and zip code)

For further information concerning this matter, please call:

LoriAnn Ayers, CAM, CFPM

(Name of person)

at (239) 481-1577

(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
409 E. Gaines Street
Tallahassee, FL 32399

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: Cross Creek of Fort Myers Single Family Condominium II Association, Inc.
- 2. The principal office address: C/o P & M Property Management 15660 San Carlos Blvd. #40 Ft. Myers, Fl 33908
- 3. The mailing address (if different): SAME
- 4. Date of incorporation/qualification: _____ Document number: N15099

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

James Hart
C/O sentry Management
2180 WEST SR 434 Suite 5000
2019 WOOD FL 32779

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 03 AUG - 1 PM '03
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 TALLAHASSEE, FLORIDA

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

LoriAnn Ayers, CAM, CFPM
15660 San Carlos Blvd. #40
(P.O. Box or personal mailbox NOT acceptable)
Ft. Myers, Fl 33908

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.

Nicholas Williams
(Signature of an officer, chairman or vice chairman of the board)

Nicholas Williams, Treasurer
(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.

LoriAnn Ayers CAM CFPM
(Signature of Registered Agent)

7/28/03
(Date)

If signing on behalf of an entity:

LoriAnn Ayers, CAM, CFPM
(Typed or Printed Name)

Association Manager
(Capacity)

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