N1600000 7829

(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:		
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)	
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Certified Copies Certificates of Status	(Business Entity Name)	
·	(Document Number)	
Special Instructions to Filing Officer:	Certified Copies Certificates of Stat	us
	Special Instructions to Filing Officer:	





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2021 MAR 15 AM II: 03 SECRETARY OF STATE



COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Estero Pointe Community Association, Inc.	
Name of Corporation	
DOCUMENT NUMBER: N16000007828	
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Bryan Fowler	
Name of Contact Person	
Southwest Property Management	
Firm/Company	
1044 Castello Drive, Suite 206	
Address	
Naples, FL 34103	
City/State and Zip Code	
bfowler@swpropmgt.com	
E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please ca	all:
Bryan Fowler	21 (239) 261-3440
Name of Contact Person	at (239) 261-3440 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Departi	ment of State.
Mailing Address: Amendment Section	Street Address:
Amendment Section Division of Corporations	Amendment Section
P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (04/13)

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 Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: Estero Pointe Community Association, Inc.
2. The principal	office address: Southwest Property Management
1044 Castello Dr	ive. Suite 206, Naples, FL 34103
3. The mailing a	ddress (if different): same as above
	poration/qualification: 8/9/2016 Document number: N16000007828
5. The name and	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	NRAI Services, Inc.
	1200 South Pine Island Road
	Plantation, FI 33324
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office SECRET Bryan Fowler c/o Southwest Property Management
	Bryan Fowler c/o Southwest Property Management
	1044 Castello Drive, Suite 206
	Naples, FL 34103 Separate PO Box NOT acceptable Naples, FL 34103 Separate PO Box NOT acceptable FIG. Box NOT acceptab
The street address changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Signature	e gran Miscor or disector - USAN JANICE - FERRIS Printed or typed name and title
I further agree to of my duties, and document is bein	the appointment as registered agent and agree to act in this capacity. O comply with the provisions of all statutes relative to the proper and complete performance I I am familiar with and accept the obligation of my position as registered agent. Or, if this 1g filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Sign	3/1/2021 Mure of Registered Agent 9ate
If signing on bel	nalf of an entity:
BOUR	Fauler

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

Typed or Printed Name