

N16017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

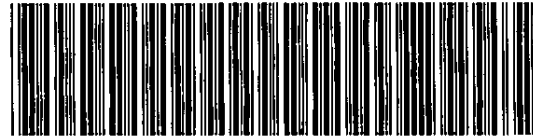
(Business Entity Name)

(Document Number)

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D. CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: St. Tropez of Pelican Bay Condominium Association Inc.
Name of Corporation

DOCUMENT NUMBER: N16017

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:

Adoni Kokkinos

Name of Contact Person

Newell Property Management Corporation

Firm/Company

5435 Jaeger Road Suite 4

Address

Naples FL 34109

City/State and Zip Code

brigit@newellpropertymanagement.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adoni Kokkinos

Name of Contact Person

at (239) 514-1199

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

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SECRETARY OF STATE
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: St. Tropez of Pelican Bay Condominium Association Inc.
2. The principal office address: c/o Newell Property Management
5435 Jaeger Road #4, Naples FL 34109
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7/24/1986 Document number: N16017
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)

Carol J. Miller

5501 Heron Point Drive Suite 1102

Naples FL 34108

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

Adoni Kokkinos, Agent

c/o Newell Property Management Corporation

P.O. Box NOT acceptable

5435 Jaeger Road #4, Naples FL 34109

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.

Carol J. Miller - President Carol J. Miller - President Condo
Signature of an officer or director Printed or typed name and title ASSOC.

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

11/28/2010
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
CR2E045 (03/12)

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