N/836/

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COVER LETTER

TO: Amendment Section
Division of Corporations

	Name of Corporation
DOCUMENT NUMBER:	N18361
The enclosed Statement of Change of Regist	tered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Wil	liam A Newell, Agent
N	ame of Contact Person
Newell Prop	erty Management Corporation
	Firm/Company
54	135 Jaeger Road #4
	Address
Na C	aples, Florida 34109 ity/State and Zip Code
F mail address: (to be	wellbb@yahoo.com used for future annual report notification)
E-man address. (to be	used for future annual report notification)
For further information concerning this matt	er, please call:
William Newell, Agent	at (239) 514-1199 Area Code & Daytime Telephone Number
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 Corpo P.O. Box 6327 Tallahassee, FL 33	orations Division of Corporations Clifton Building

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida	
	er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: Trafalgar Square Condominium Association of Naples Inc	<u>. </u>
2. The principal	office address: c/o Newell Property Management Corporation, 5435 Jaeger Road #	4
Naples FL	. 34109	_
3. The mailing a	address (if different):	_
4. Date of incorp	poration/qualification: 12/19/1986 Document number: N18361	-
	d street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	 .
	Robert T Gracey	
	187 Forest Lakes Blvd 草名 富 可	
	Naples FL 34105	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the new registered agent (if changed) and /or registered office with the control of the control of the new registered agent (if changed) and /or registered office with the control of the control of the new registered agent (if changed) and /or registered office with the control of the con)
	William A Newell, Agent	
	5435 Jaeger Road #4	
	P.O. Box NOT acceptable Naples FL 34109	
_	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wauthorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Hoy	Who floring (Treas) Koy W Goodwin Printed only ped name and title the appointment as registered agent and agree to act in this capacity.	(P.C
I hereby accept I further agree of my duties, ar document is be corporation ha	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 complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change.	
	gnature of Registered Agent Date	
If signing on be	chalf of an entity:	
WILLIA	un a NEWELL	

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

Typed or Printed Name