

N24962

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUNRISE AT FOUNTAIN LAKES NEIGHBORHOOD ASSOC.
Name of Corporation

DOCUMENT NUMBER: N 24962

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:

FRANK BONACCI
Name of Contact Person

PLATINUM PROPERTY MGMT.
Firm/Company

1016 COLLIER CENTER WAY #102
Address

NAPLES, FL 34110
City/State and Zip Code

abruener@platinumpm.net
E-mail address: (to be used for future annual report notification)

51020

JUN 21 2011

For further information concerning this matter, please call:

AMY BRUENER at (299) 596-1031
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 Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
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: SUNRISE AT FOUNTAIN LAKES NEIGHBORHOOD ASSOC.
2. The principal office address: 1016 COLLIER CENTER WAY #102
NAPLES, FL 34110
3. The mailing address (if different): _____

4. Date of incorporation/qualification: FEB. 9, 1987 Document number: N 24962
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)

COMPASS GROUP
3701 TAMiami TR. N.
NAPLES, FL 34103

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

PLATINUM PROPERTY MGMT.
1016 COLLIER CENTER WAY #102
NAPLES, FL 34110

P.O. Box NOT acceptable

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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.

Michael C. Clevens
Signature of an officer or director

MICHAEL C. CLEVENS DIRECTOR
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.

Leo Bruehl
Signature of Registered Agent

6-20-11
Date

If signing on behalf of an entity:

PLATINUM PROPERTY MGT.
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 (8/05)