

N26625

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

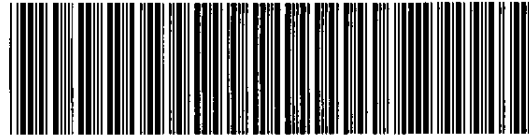
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Michael Jarvis Advised  
to change (Mike) to  
Michael Jarvis 8/9/11

Office Use Only



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500210806555  
08/08/11-01028--001 \*\*35.00

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 AUG - 8 AM 8:45

RA/RD/chs  
@ 8/9/11

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Sunset Towers Apartments Condominium Association, INC.  
Name of Corporation

DOCUMENT NUMBER: IV 26625

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:

Mike JARVIS  
Name of Contact Person

Sunset Towers Condominium  
Firm/Company

4803 Sunset Court  
Address

CAPE CORAL, FL 33904  
City/State and Zip Code

KMJARV@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mike JARVIS at (863) 558-3551  
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: SUNSET TOWERS APARTMENTS CONDOMINIUMS ASSOCIATION, INC.
2. The principal office address: 4803 SUNSET COURT  
CAPE CORAL, FL 33904
3. The mailing address (if different): (SAME AS ABOVE)
4. Date of incorporation/qualification: 05/06/1988 Document number: N 26625
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)

SCHOO, ATRCIA  
9411-2 CYPRESS LAKE DR, Suite 2  
FORT MYERS, FL 33919 US

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

MICHAEL JARVIS  
4803 SUNSET COURT  
CAPE CORAL, FL 33904

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.

George W. Ren  
Signature of an officer or director

George W. Ren, Vice Chair  
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.

Michael Jarvis  
Signature of Registered Agent

8-5-2011  
Date

If signing on behalf of an entity:

MICHAEL JARVIS  
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