

N27055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Charge
Tlew
10-7-10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Long Common Condominium Assn, Inc.
Name of Corporation

DOCUMENT NUMBER: N 27 055

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:

Deb Gifford
Name of Contact Person

Argus Property Management Inc
Firm/Company

2477 Stickney Pt. Rd. Suite 118A
Address

MINNESOTA FL 34231
City/State and Zip Code

Debe Argusmgmt.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jim Barry at (941) 922-6464
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 22, 2010

LONG COMMON CONDOMINIUM ASSOCIATION, INC.
2004 LONGMEADOW
SARASOTA, FL 34235

SUBJECT: LONG COMMON CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N27055

We have received your document for LONG COMMON CONDOMINIUM ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The wrong form was submitted. We are enclosing the proper form, please complete and return.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 210A00022583

RECEIVED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Long Common Condominium Association, Inc.
2. The principal office address: Argus Property Management, Inc. 2477
Stickney Pt. Rd. Suite 118A Sarasota Fl. 34231
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 6/21/1988 Document number: 1127055
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)

Rebecca F. Stokes
3053 51st St
Sarasota Fl. 34234

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

Argus Property Management, Inc.
2477 Stickney Pt. Rd. Suite 118A
Sarasota Fl. 34231

P.O. Box NOT acceptable

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.

Signature of an officer or 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.

Deborah Gifford
Signature of Registered Agent

Oct 5, 2010
Date

If signing on behalf of an entity:

Deborah Gifford
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)

FILED
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TALLAHASSEE, FLORIDA