

N29897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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10 AUG 26 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RACHA
DEC 9/8



AUG 27 2010

BY.....

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 24, 2010

SHERRY NESSOIY
CORNERSTONE ASSOCIATION MANAGEMENT
11940 FAIRWAY LAKES DR., STE. 4
FT. MYERS, FL 33913

SUBJECT: BRIARCREST HOMEOWNER'S ASSOCIATION, INC.
Ref. Number: N29897

We have received your document for BRIARCREST HOMEOWNER'S ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

PHOTO COPIES OF SIGNATURES ARE NOT ACCEPTABLE.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 810A00020238

2010 SEP -7 PM
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

1021 W
AUG 31 2010
BY: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Briarcrest Homeowners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N29897

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:

Sherry Nassoiv
Name of Contact Person

CornerStone Association Management
Firm/Company

11940 Fairway Lakes Dr. Suite 4
Address

Fort Myers, FL. 33913
City/State and Zip Code

Cornerstonemanagement@msn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sherry Nassoiv at (239) 489-2696
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: Briarcrest Homeowners Association, Inc.
2. The principal office address: 11940 Fairway Lakes Dr. Suite 4
Fort Myers, FL. 33913
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 12/27/88 Document number: N29897
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)

Ragan J. Yslas CAM
27299 Riverview Center Blvd #102
Bonita Springs, FL 34134

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

Sherry Nassoio CAM - CornerStone Association Mgt.
11940 Fairway Lakes Dr. Suite 4
Fort Myers, FL. 33913

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.

Lori Beechant
Signature of an officer or director

Lori Reichart - Treasurer
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.

Sherry Nassoucy
Signature of Registered Agent

August 26, 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 (8/05)

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10 AUG 26 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA