

N37062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

RA/RO change
@ 12/20/02



400009349724

12/11/02--01053--006 **35.00

FILED

02 DEC 11 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KELLY GREENS LAKE CONDOMINIUM ASSN INC
(Name of corporation)

DOCUMENT NUMBER: _____

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:

BEATRICE DILLER
(Name of person)

TOP MGMT OF SW FL INC
(Name of firm/company)

16681 MCGREGOR BLVD #104
(Address)

FT MYERS FL 33908
(City/state and zip code)

For further information concerning this matter, please call:

BEATRICE DILLER at (239) 466 3330
(Name of 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
409 E. Gaines Street
Tallahassee, FL 32399

FILED
02 DEC 11 PM 4:00
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: KELLY GREENS MANOR CONDOMINIUM VI ASSN INC
2. The principal office address: 16681 MC GREGOR BLVD # 104
FT MYERS FL 33908
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/8/90 Document number: N37062
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ARLENE O'NEILL
9400 GLADIOLUS DR #100
FT MYERS FL 33908

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

BEATRICE DILLER
910 TOP MOUNT DR SW FLA INC
16681 MC GREGOR BLVD #104
(P.O. Box or personal mailbox NOT acceptable)
FT MYERS FL 33908

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.

Robert Hartman
(Signature of an officer, chairman or vice chairman of the board)

ROBERT HARTMAN
(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.

Beatrice Diller
(Signature of Registered Agent)

12/9/02
(Date)

If signing on behalf of an entity:

BEATRICE DILLER
(Typed or Printed Name)

Owner - OWNER
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA