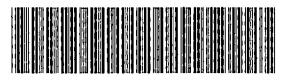


(Re	questor's Name)	<del></del>
(Ad	dress)	
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(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

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BY:		Ly)	

TO: Amendment Section Division of Corporations

EAGLE POINTE PHASE I COMMUNITY ASSOCIATION, INC.
Name of Corporation
DOCUMENT NUMBER: N38194

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 Nassoiy Name of Contact Person CornerStone Association Management, Inc. Firm/Company 11934 Fairway Lakes Drive, Suite 1 Address Ft. Myers, FL 33913 City/State and Zip Code email@cshoamanagement.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

	U			
Christopher Tes	ster	at	ر239	489-2696
Name of Contac	t Person	<del></del>	Area Code d	& 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

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## 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: EAGLE POINTE PHASE I COMMUNITY ASSOCIATION, INC.
2. The principal office address: c/o CornerStone Association Management, Inc.
11934 Fairway Lakes Drive, Suite 1, Ft. Myers, FL 33913
3. The mailing address (if different): c/o CornerStone Association Management, Inc.
11934 Fairway Lakes Drive, Suite 1, Ft. Myers, FL 33913
4. Date of incorporation/qualification: 05/18/1990 Document number: N38194
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)
CHRISTOPHER SHIELDS, PAVESE LAW FIRM
1833 HENDRY ST.
FORT MYERS, FL 33901
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
SHERRY NASSOIY, C/O CORNERSTONE ASSOCIATION MANAGEMENT, INC.
11934 FAIRWAY LAKES DR. SUITE 1
P.O. Box NOT acceptable
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 of by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer of direct 1/20 / Kendra Sutton, President
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.
Theny Massoil 12/15/17
Signature of Registered Agent Date
If signing on Schalf of an entity:
Sharry Nassaly  Typed or Printed Name
* * * FILING FEE: \$35.00 * * *