

N40831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

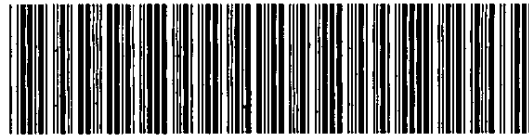
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Waterford At Bonita Bay Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N40831

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:

Ralph L. Weidner, CAM
(Name of Contact Person)

Gulf Breeze Management Services of SW FL, LLC
(Firm/Company)

8910 Terrene Court, Suite 200
(Address)

Bonita Springs, FL 34135
(City/State and Zip Code)

For further information concerning this matter, please call:

Ralph L. Weidner, CAM at (239) 498-3311
(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, 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.

JUN 06 2008
Received by
GULF BREEZE MGMT.

1. The name of the corporation: Waterford at Bonita Bay Association, Inc.
%Gulf Breeze Management Services of SW FL, LLC
2. The principal office address: 8910 Terrene Court, Suite 200
Bonita Springs, FL 34135
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/13/1990 Document number: N40831

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Independent Management, LLC
27299 Riverview Center Bl., #102
Bonita Springs, FL 34134

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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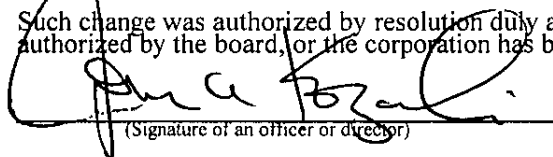
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6. The name and street address of the new registered agent (if changed) and/or registered officer (if changed):

Ralph L. Weidner, CAM
Gulf Breeze Management Services of SW FL, LLC
8910 Terrene Court, Suite 200
(P.O. Box NOT acceptable)
Bonita Springs, FL 34135

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)

John Kozacki, President
(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.

Ralph L. Weidner
(Signature of Registered Agent)

May 8, 2008
(Date)

If signing on behalf of an entity:

Ralph L. Weidner, CAM
(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

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