

N47825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

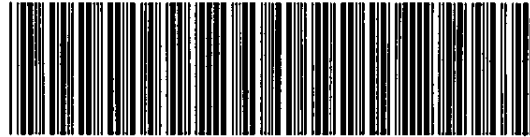
(Business Entity Name)

(Document Number)

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C. McNair

OCT 15 2015

C McNAIR



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 1, 2015

MEL MCFADDEN
RIVER ROYALE OF IMPERIAL HOMEOWNERS ASS.
27209 RIVER ROYALE CT.
BONITAL SPRINGS, FL 34135

SUBJECT: RIVER ROYALE OF IMPERIAL HOMEOWNERS ASSOCIATION,
INC.
Ref. Number: N47825

We have received your document 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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair
Regulatory Specialist II

Letter Number: 615A00020805

RECEIVED

15 OCT 14 AM 10:17

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RIVER ROYALE OF IMPERIAL HOMEOWNERS ASSC. Inc.
Name of Corporation

DOCUMENT NUMBER: N47825

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:

MEL MCFADDEN

Name of Contact Person

RIVER ROYALE OF IMPERIAL HOMEOWNERS ASSC. Inc
Firm/Company

27209 RIVER ROYALE CT
Address

BONITA SPRINGS, FL 34135
City/State and Zip Code

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

For further information concerning this matter, please call:

MEL MCFADDEN

Name of Contact Person

at (239) 218-2832

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: RIVER ROYALE OF IMPERIAL HOMEOWNERS ASSOCIATION INC.
2. The principal office address: 27249 RIVER ROYALE CT
BONITA SPRINGS, FL 34135
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 3/12/1992 Document number: N 47825

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)

EARLE E HALL
27249 River Royale Ct
BONITA SPRINGS, FL 34135

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

MEL MCFADDEN
27209 RIVER ROYALE CT
BONITA SPRINGS, FL 34135

P.O. Box NOT acceptable

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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]
Signature of an officer or director

9/16/15
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.

[Signature]
Signature of Registered Agent

9/16/15
Date

If signing on behalf of an entity:

MEL MCFADDEN - PRESIDENT
Typed or Printed Name

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