

N50959

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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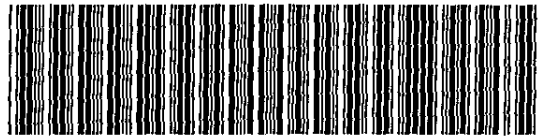
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. change

T BROWN JUN - 3 2003

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Homeowners Association of Sarasota Golf Colony, Inc.
(Name of corporation)

DOCUMENT NUMBER: N50959

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:

Kevin T. Wells, Esquire

(Name of person)

Lobeck Hanson & Wells, P.A.

(Name of firm/company)

2033 Main Street, Suite 403

(Address)

Sarasota, FL 34237

(City/state and zip code)

For further information concerning this matter, please call:

Kevin T. Wells, Esquire

(Name of person)

at (

941

) 955-5622

(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 20, 2003

KEVIN T. WELLS, ESQ.
LOBECK HANSON & WELLS, P.A.
2033 MAIN STREET, SUITE 403
SARASOTA, FL 34237

SUBJECT: HOMEOWNERS ASSOCIATION OF SARASOTA GOLF COLONY, INC.

Ref. Number: N50959

We have received your document for HOMEOWNERS ASSOCIATION OF SARASOTA GOLF COLONY, 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 registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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) 245-6869.

Teresa Brown
Document Specialist

Letter Number: 803A00031350

**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: Homeowners Association of Sarasota Golf Colony, Inc.

2. The principal office address: 7 South Lime Avenue, Sarasota, Florida 34237

3. The mailing address (if different): P.O. Box 2692, Sarasota, Florida 34230-2692

4. Date of incorporation/qualification: 09/22/92 Document number: N50959

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

Stephen H. Kurvin

7 South Lime Avenue

Sarasota, FL 34237

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

Lobeck Hanson & Wells, P.A. c/o Kevin T. Wells, Esquire

2033 Main Street, Suite 403

(P.O. Box or personal mailbox NOT acceptable)

Sarasota, FL 34237

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.

Denise Uhlain
(Signature of an officer, chairman or vice chairman of the board)

Denise Uhlain Vice 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.

[Signature]
(Signature of Registered Agent)

5-12-03
(Date)

If signing on behalf of an entity:

Kevin T. Wells, Esquire

(Typed or Printed Name)

Agent / Attorney
(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

FILED
03 MAY 27 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA