N9400000 3205

(Kē	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	· · · · ·
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(55	omess Emily Har	ne,
(00	cument Number)	
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	

Office Use Only



800323224168

07/25/19--01088--006 **35.00

S TALLENT JUL 3 0 2019 2019 JUL 25 PM 6: 17

RACH

COVER LETTER

TO: Amendment Section Division of Corporations

Professional Court Condominium Association, Inc. Name of Corporation

N94000003205

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:

Bryan Fowler

Name of Contact Person

Southwest Property Management

Firm/Company

1044 Castello Drive, Ste. 206

Naples, Fl. 34103
City/State and Zip Code

Bfowler@swpropmgt.com

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

For further information concerning this matter, please call:

Bryan Fowler

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida ange is submitted for a corporation organized under the laws of the State of er to change its registered office or registered agent, or both, in the State of .	Florida		_
	the corporation: Professional Court Condominium Associa			
	office address: c/o Southwest Property Management			
	stello Dr., Ste. 206, Naples, Fl. 34103			
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: 6-28-94 Document number: N9400	00003	205	
5. The name and Florida Depa	I street address of the current registered agent and registered office on file wrtment of State: (If resigned, enter resigned)			
	Vesta PropertY Services, Inc.			
27180 Bay Landing Drive, Suite 4		ري دين	20	
	Bonita Springs, Fl. 34135	15-177	019 JUL 25	-:
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered of	fice Al		6
	Southwest Property Management	STAI	PM 6: 1	
	1044 Castello Dr., Ste. 206	ΙΉ	7	
	P.O. Box NOT acceptable Naples, Fl. 34103			
The street addre	ss of its registered office and the street address of the business office of its be identical.	s registe	red ag	ent,
Such change wa	s authorized by resolution duly adopted by its board of directors or by an element, or the corporation has been notified in writing of the change.	officer s	o	
	y of an officer or director Printed or typed name and title		P	_
I hereby accont	the appointment as registered agent and agree to act in this capacity. Occupily with the provisions of all statutes relative to the proper and commy duties, and I am familiar with and accept the obligation of my position of duties, and is being filed merely to reflect a change in the registered officient the corporation has been notified in writing of this change.		stered is, I	
Sign	ature of Registered Agent Date			_
If signing on bel	•			
Ba	m Forly			
	ped or Printed Name			

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

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