

N94000004283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

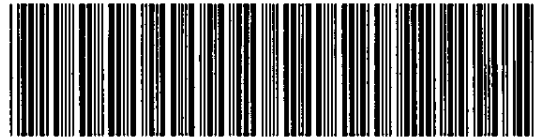
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/11/14--01008--001 **35.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 27, 2014

STEPHEN WILLIAMS
SOUTHWEST PROPERTY MANAGEMENT INC
1044 CASTELLO DR STE 206
NAPLES, FL 34103

SUBJECT: MONTEREY VILLAS CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N94000004283

We have received your document for MONTEREY VILLAS CONDOMINIUM ASSOCIATION, 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):

PLEASE HAVE OFFICER OF MONTEREY VILLAS CONDO. ASSOCIATION, INC. SIGN.

Re: Document Number N94000004283

The Application for Withdrawal of Authority was filed on , for MONTEREY VILLAS CONDOMINIUM ASSOCIATION, INC., a Florida corporation which was authorized to transact business or conduct affairs in Florida.

Your certification is enclosed.

Should you have any questions regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Cathy A Carrothers
Regulatory Specialist
Division of Corporations

Letter Number: 514A00018455

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Monterey Villas Condominium Assoc. Inc.
Name of Corporation

DOCUMENT NUMBER: N 940 000 042 83

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:

Stephen E. Williams
Name of Contact Person

Southwest Property Management, Inc.
Firm/Company

1044 Castello Dr., Ste 206
Address

Naples, Fl. 34103
City/State and Zip Code

SWilliam@swpropmgt.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephen E. Williams at (239) 261-3440 Ext. 117
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

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.

- Anchor Associates, Inc. (BRADA PHELPS Agent)
3940 Radio Road, Ste 112
Naples, Fl. 34104

- 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.

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.

If signing on behalf of an entity:

CR2E045 (8/05)