

N95000003406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

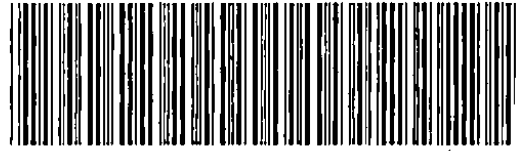
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



10033559617

SEP 11 2019

10/11/2019



COGENCYGLOBAL®

115 N CALHOUN ST.,
TALLAHASSEE, FL 32
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL®

Account#: 12000000

Date: 10/11/2019

Name: Jennifer Bialowas

Reference #: 1139981

Entity Name: SUMMER BAY LAKESIDE CONDOMINIUM ASSOCIATION, INC.

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☒ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other _____

Authorized Amount: 35.00

Signature: 

• CORPORATE HQ
COGENCY GLOBAL LLC
10 E 40TH ST, 10TH FL
NY, NY 10016
D: +1.212.947.7200
P: 800.221.0102
F: 800.944.6607

• EUROPEAN HQ
COGENCY GLOBAL (UK) LIMITED
REGISTERED IN ENGLAND & WALES
REGISTRY #4010712
6 LLOYDS AVE, UNIT 4CL
LONDON EC3N 3AX
+44 (0)20.3961.3080

• ASIA PACIFIC HQ
COGENCY GLOBAL (HK)
A HONG KONG LIMITED COMP.
UNIT B, 1/F, LIPPO LEIGHT
103 LEIGHTON RD, CAUSEWAY
HONG KONG
P: +852.2682.9633
F: +852.2682.9790

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: SUMMER BAY LAKESIDE CONDOMINIUM ASSOCIATION

2. The principal office address: 25 Town Center Blvd. Suite C Clermont, FL 34714

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 07/17/1995 Document number: N95000003406

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)

Caldwell, Paul M 25 Town Center Blvd. Suite C Clermont, FL 34714

25 Town Center Blvd. Suite C Clermont, FL 34714

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

Cogency Global Inc.

115 North Calhoun Street, Suite 4 Tallahassee, FL 32301 (Leon County)

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.

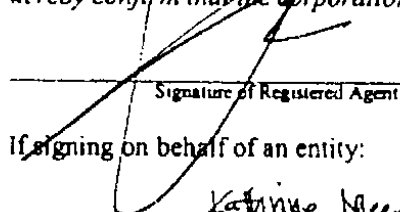
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Jennifer A. Lizotte, Vice President and Secretary

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 of Registered Agent

10/10/2009

Date

If signing on behalf of an entity:

Katherine Neer

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
CR2E045 (03/12)