## N95000004541

| (Requestor's Name)                      |         |
|---|---------|
| (Address)                               | <u></u> |
| (Address)                               |         |
| (City/State/Zip/Phone #)                |         |
| PICK-UP WAIT                            | MAIL    |
| (Business Entity Name)                  |         |
| (Document Number)                       |         |
| Certified Copies Certificates of        | Status  |
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DIVISION OF CORPORATIONS

PARD Ch8

## **COVER LETTER**

TO: Amenda

Amendment Section Division of Corporations

## SUBJECT: Rivendell Community Association, Inc.

Name of Corporation

DOCUMENT NUMBER: N95000004547

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, Esq.

Name of Contact Person

Law Offices of Kevin T. Wells, P.A.

Firm/Company

1800 2nd Street, Suite 808

Address

Sarasota, Florida 34236

City/State and Zip Code

kwells@kevinwellspa.com

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

For further information concerning this matter, please call:

Kevin T. Wells, Esq.

,941

366-9191

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

## • 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: Rivendell Community Association, Inc.  |
| 2. The principal office address: Lighthouse Property Management, Inc., 16 Church Street, Osprey, Florida 34229   |
| 3. The mailing address (if different): Lighthouse Property Management, Inc., 16 Church Street Osprey, Florida 34229  |
| 4. Date of incorporation/qualification: 09/22/1995 Document number: N95000004547   |
| 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)   |
| Merrill, Bobby   |
| 634 Rivendell Boulevard  |
| Osprey, Florida 34229  |
| Osprey, Florida 34229  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):   |
| The Law Offices of Kevin T. Wells, P.A.  |
| 1800 2nd Street, Suite 808  P.O. Box NOT acceptable  |
| Sarasota, Florida 34236  |
| 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.  |
| Bolly Merch Treasurer  Signature of an officer or director 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 it this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the comparation has been notified in writing of this change. |
| 11-20-2012   |
| Signature of Registered Agent Date   |
| If signing on behalf of an entity:   |
| Keun Tuels Typed or Printed Name   |

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