

N96000005469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

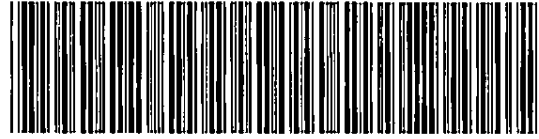
(Business Entity Name)

(Document Number)

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AUG 14 2017

S. YOUNG

FILED IN FLORIDA

17 AUG 11 PM 4:48

FBI FFD



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2017

DEBI TALIAFERRO
DETAI & ASSOCIATES
27499 RIVERVIEW CENTER BLVD #208
BONITA SPRINGS, FL 34134

SUBJECT: CHARLESTON SQUARE CONDOMINIUM ASSOCIATION
NAPLES, INC.
Ref. Number: N96000005469

RECEIVED
2017 AUG 11 PM 2:45
STATE DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CHARLESTON SQUARE CONDOMINIUM ASSOCIATION OF NAPLES, 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 CURRENT REGISTERED AGENT MUST BE LISTED

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) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 417A00014234

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Charleston Square Condo Association of Naples Inc
Name of Corporation

DOCUMENT NUMBER: N96000005469

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:

Debi Taliaferro
Name of Contact Person

Detali & Associates
Firm/Company

27499 Riverview Center Blvd, # 208
Address

Bonita Springs, FL 34134
City/State and Zip Code

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

For further information concerning this matter, please call:

Debi Taliaferro at (239) 495-1057
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: Charleston Square Condo Association of Naples Inc
2. The principal office address: 27499 Riverview Center Blvd, # 208
Bonita Springs, FL 34134
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/21/1996 Document number: N96000005469
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)

~~RESIGNED~~ Guardian Property Mgmt
6704 Lone Oak Blvd
NAPLES, FL 34109


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

Detali & Associates
27499 Riverview Center Blvd, # 208
P.O. Box NOT acceptable
Bonita Springs, FL 34134

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17 AUG 11 09 49 AM '17
TALLAHASSEE, FLORIDA

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

Trevor Calhoun

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.

Debi Taliaferro

Signature of Registered Agent

6/15/2017

Date

If signing on behalf of an entity:
Debi Taliaferro

Typed or Printed Name

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