

N 9600000 6490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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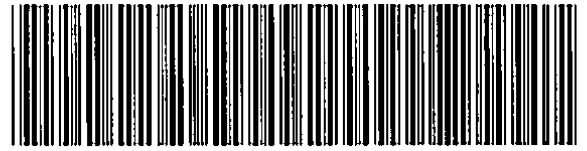
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Sorrento at The Colony Condominium Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N96000006490

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:

**Robert Loomis**

Name of Contact Person

Sorrento at The Colony Condominium Association, Inc

Firm/Company

**23650 Via Veneto # 104**

Address

**Estero, FL 34134**

City/State and Zip Code

**sorrentocolony@gmail.com**

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

For further information concerning this matter, please call:

**Angie Thompson, Office Manager**

Name of Contact Person

at ( **239** ) **949-8508**

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

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**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: Sorrento at The Colony Condominium Association, Inc

2. The principal office address: 23650 Via Veneto # 104, Estero FL 34134

3. The mailing address (if different): same as above

4. Date of incorporation/qualification: 11/28/01 Document number: N96000006490

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

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

Bonnie L. Schinke

23650 Via Veneto # 103

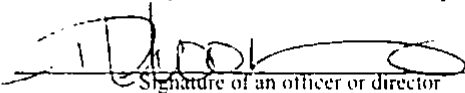
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Estero, FL 34134

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STATE  
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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

Robert Loomis, President

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

06/03/19

Date

If signing on behalf of an entity:

Bonnie L. Schinke

Typed or Printed Name

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

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000006490

**Entity Name:** THE SORRENTO AT THE COLONY CONDOMINIUM  
ASSOCIATION, INC.

**Current Principal Place of Business:**

23650 VIA VENETO BLVD.  
#104  
ESTERO, FL 34134

**Current Mailing Address:**

23650 VIA VENETO BLVD.  
#104  
ESTERO, FL 34134 US

**FEI Number:** 59-3416297

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BIASI, JOHN A.  
23650 VIA VENETO BLVD.  
#104  
ESTERO, FL 34134 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida*

**SIGNATURE:** JOHN A. BIASI

04/18/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name EL-KHASHAB, MOUSTAFA RASHAD  
Address 23650 VIA VENETO BLVD. # 1501  
City-State-Zip: ESTERO FL 34134

Title SECRETARY  
Name CONNELL, THOMAS  
Address 23650 VIA VENETO BLVD. # 1104  
City-State-Zip: ESTERO FL 34134

Title TREASURER  
Name RAGAZZO, RICHARD  
Address 23650 VIA VENETO BLVD. # 1604  
City-State-Zip: ESTERO FL 34134

Title PRESIDENT  
Name LOOMIS, ROBERT  
Address 23650 VIA VENETO BLVD. # 702  
City-State-Zip: ESTERO FL 34134

Title DIRECTOR  
Name SHINOUSKIS, EDWARD JOSEPH  
Address 23650 VIA VENETO BLVD. # 901  
City-State-Zip: ESTERO FL 34134

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** THOMAS CONNELL

SECRETARY

04/18/2019

Electronic Signature of Signing Officer/Director Detail

Date