

N97000004673

(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



800081296398

11/06/06--01033--013 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 NOV -6 PM 1:39

ES 11/14/06
NA/NO



LAW OFFICES
BOONE, BOONE, BOONE, KODA & FROOK, P.A.

P. O. BOX 1596
VENICE, FLORIDA 34284

ESTABLISHED 1956

E.G. (DAN) BOONE
JEFFERY A. BOONE
STEPHEN K. BOONE
JOHN S. KODA
MARGARET (PEGGY) S. FROOK

JAMES T. COLLINS, LAND PLANNER
(NOT A MEMBER OF THE FLORIDA BAR)

STREET ADDRESS:
1001 AVENIDA DEL CIRCO 34285
TELEPHONE (941) 488-6716
FAX (941) 488-7079
e-mail: adm@boone-law.com

November 2, 2006

**Amendment Section
Divisions of Corporations
P.O. Box 6327
Tallahassee, Florida 32314**

RE: South Tamiami Trail Associates, Inc.

To Whom It May Concern:

Enclosed please find a Statement Of Change Of Registered Agent and a check for \$35.00 for the filing fee for the corporation of South Tamiami Trail Associates, Inc.

Should you have any questions, please let me know.

Kind regards

Very truly yours,

Stephen K. Boone

SKB

Enclosures

T19-6062\ltr110206

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: South Tamiami Trail Associates, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N97000004673

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 K. Boone, Esquire
(Name of Contact Person)

Boone Law Firm
(Firm/Company)

P.O. Box 1596
(Address)

Venice, Florida 34284
(City/State and Zip Code)

For further information concerning this matter, please call:

Stephen K. Boone, Esquire at (941) 488-6716
(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,
the undersigned corporation organized under the laws of the State of Florida
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.

1. The name of the corporation : South Tamiami Trail Association, Inc.
2. The mailing address of the corporation : 6700 Conroy Rd., Ste 230,
Orlando, Florida 32835
3. Date of incorporation/qualification: 8/15/1997 Document number: N97000004673
4. The name and address of the current registered agent and office:
Jeffrey A. Boone
1001 Avenida Del Circo
Venice, Florida 34285
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)
Alan Charron
6700 Conroy Rd., Ste 230
Orlando, Florida 32835

FILED
STATE
SECRETARY OF CORPORATIONS
2006 NOV -6 PM 1:39

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.

(Signature of an officer, chairman or vice chairman of the board)

10/11/06
(Date)

Alan Charron, President

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

(Signature of Registered Agent)

10/11/06
(Date)

If signing on behalf of an entity:

N/A

(Typed or Printed Name)

(Capacity)

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