

0917000005526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

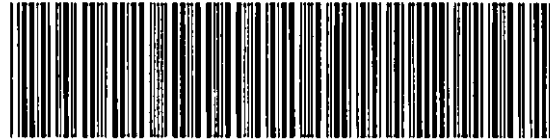
(Business Entity Name)

(Document Number)

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T. LEPAGE JR.

Handwritten signature

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THE ENCLAVE NEIGHBORHOOD HOMEOWNERS ASSOCIATION, INC..
Name of Corporation

DOCUMENT NUMBER: N97000005526

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:

Sherry Nassoiy

Name of Contact Person

CornerStone Association Management, Inc.

Firm/Company

11934 Fairway Lakes Drive, Suite 1

Address

Ft. Myers, FL 33913

City/State and Zip Code

email@cshoamanagement.com

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

For further information concerning this matter, please call:

Christopher Tester

Name of Contact Person

at **239 489-2696**

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: THE ENCLAVE NEIGHBORHOOD HOMEOWNERS ASSOCIATION, INC.
2. The principal office address: c/o CornerStone Association Management, Inc.
11934 Fairway Lakes Drive, Suite 1, Ft. Myers, FL 33913
3. The mailing address (if different): c/o CornerStone Association Management, Inc.
11934 Fairway Lakes Drive, Suite 1, Ft. Myers, FL 33913
4. Date of incorporation/qualification: 09/30/1997 Document number: N97000005526
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)

SENTRY MANAGEMENT INC

2180 WEST SR 434 SUITE 5000

LONGWOOD, FL 32779

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

SHERRY NASSOIY, C/O CORNERSTONE ASSOCIATION MANAGEMENT, INC.

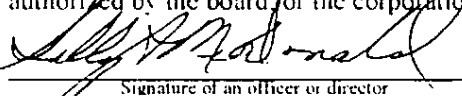
11934 FAIRWAY LAKES DR. SUITE 1

P.O. Box NOT acceptable

FORT MYERS, FL 33913

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

Sally McDonald, 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

12/15/17

Date

If signing on behalf of an entity:


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)