(Requestor's Name) (Address) (Address)	800062371038
(City/State/Zip/Phone #)	
(Business Entity Name)	12/27/0501032022 **35.00
(Document Number) Certified Copies Certificates of Status	OS DEC 27 PM 1:5 SECIRE TARY OF STAT TALLAHASSEE, FLORI
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tage is submitted for a corporation organized under the laws of the State of Florida
in orde	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: The Residences at Gondola Park Condominium Association, Inc.
2. The principal	office address: 153 Center Road, Venice, FL 34285
3. The mailing a	address (if different): 153 Center Road, Venice, FL 34285
4. Date of incorp	poration/qualification: 09/30/97 Document number:
	d street address of the current registered agent and registered office on file with the rtment of State:
	Argus Property Management
	2477 Stickney Point Road, Suite 118A
	Sarasota, FL 34231
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office C
	Argus Management of Venice, Inc
	153 Center Road
	(P.O. Box NOT acceptable)
	Venice, FL 34285
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, l be identical.
Such change we authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
(Signati	ure of an officer or director) (Printed of typed name and fitte)
I hereby accept I further agree of my duties, ar document is be corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the speem notified in writing of this change.
Koleat	gnature of Registered Agent) (Date)
	chalf of an entity:
Rober	Typed or Printed Name)

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

COVER LETTER

FILED

TO: Amendment Section Division of Corporations

SUBJECT: The Residences at Gondola Park (Condominium Association) (Name of Corporation)

DOCUMENT NUMBER: N97000005558
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 Simpson (Name of Contact Person)
Argus Management of Venice, Inc (Firm/Company)
153 Center Road (Address)
Venice, FL 34285 (City/State and Zip Code)
For further information concerning this matter, please call:
Barbara O'Grady at (941) 408-7413 (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