

N97000006255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

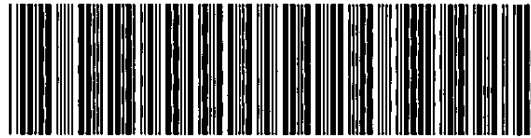
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B.A. change

JB

10/19/07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Countyside of Cape Coral Condo
(Name of Corporation)

DOCUMENT NUMBER: 1197000006255

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:

Lillian G. Chartier
(Name of Contact Person)

(Firm/Company)

3917 Country Club Blvd. #203
(Address)

Cape Coral, FL 33904
(City/State and Zip Code)

For further information concerning this matter, please call:

Lillian G. Chartier at (239) 540-1607
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 4, 2007

LILLIAN G. CHARTIER
3917 COUNTRY CLUB BLVD., #203
CAPE CORAL, FL 33904

SUBJECT: COUNTRYSIDE OF CAPE CORAL CONDOMINIUM ASSOCIATION,
INC.
Ref. Number: N97000006255

We have received your document for COUNTRYSIDE OF CAPE CORAL
CONDOMINIUM ASSOCIATION, 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 attached form must be completed in order to file the document.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 707A00057997

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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.

Association, Inc.

1. The name of the corporation: Country side of Cape Coral Condominium
2. The principal office address: 3917 Country Club Blvd. #203
Cape Coral, FL 33904
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/6/97 Document number: N97 00000 6255

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Susan Kase
American Mgt Co.
Box 100 399, 615 Cape Coral Pkwy.
Cape Coral, FL 33910

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

Lillian G. Chartier
3917 Country Club Blvd #203
(P.O. Box NOT acceptable)
Cape Coral, FL 33904

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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.

Lillian G. Chartier
(Signature of an officer or director)

Lillian G. Chartier
(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.

Lillian G. Chartier
(Signature of Registered Agent)

10/16/07
(Date)

If signing on behalf of an entity:

Lillian G. Chartier
(Typed or Printed Name)

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