

N9800005207



15933 Clayton Road
P. O. Box 100
Ballwin (St. Louis), MO 63022-0100
Phone: 636/391-6700
FAX: 636/391-4572

September 1, 1999

Secretary of State
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-09/23/99-01001-002
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**RE: Fiddler's Bend Condominium Association, Inc.
Manatee County, Florida
State Reference No. 9800005207
Appointment of Registered Agent**

To Whom It May Concern:

Enclosed with this letter of advisory, please find an original of (1) Resolution Of The Board Of Administration Changing Its Registered Agent and (2) Acceptance Of Appointment Of Registered Agent And Designation Of Registered Office. Each of these documents being relative to the above referenced condominium association and the changing of its Registered Agent all in complete conformance with Chapter 617, Florida Statute.

Should this matter necessitate further clarification on behalf of the Board of Administration, please contact the undersigned.

Very truly yours,

James D. Tepper, RA
Director & Vice President
Fiddler's Bend Condominium

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

September 9, 1999

JAMES D. TEPPER
FRU-CON DEVELOPMENT CORPORATION
P. O. BOX 100
BALLWIN (ST. LOUIS), MO 63022-0100

SUBJECT: FIDDLER'S BEND CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N98000005207

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Section 607.1622(7) or 617.1622(7), Florida Statutes, provides that a corporation may file an additional updated annual report. The enclosed annual report form can be used for designating the current names and addresses of the officers, directors and/or registered agent of the corporation. Please note the applicable filing fee is \$61.25.

Florida nonprofit corporations are required to have at least 3 directors or trustees. Please place the letter "D" or "T" beside the names and business addresses of each director or trustee.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6905.

Thelma Lewis
Corporate Specialist Supervisor

Letter Number: 399A00044555

Florida Department of State, Sandra B. Mortham, Secretary of State

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 is: Fiddlers Bend Condominium Association, Inc.

2. The mailing address of the corporation is: 2802 Terra Ceia Bay Boulevard Palmetto, Florida 34221

3. Date of incorporation/qualification: September 11, 1998 Document number: N98000005207

4. The name and address of the current registered agent and office:

Thomas M. McCartney
2802 Terra Ceia Bay Boulevard
Palmetto, Florida 34221

5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

Robert E. Bowles
2802 Terra Ceia Bay Boulevard
Palmetto, Florida 34221

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SECRETARY OF STATE
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.

(See Attached)

Signature of an officer, chairman or vice chairman of the board: [Signature] (Date): SEPT. 20TH 1999
JAMES D. TEPPEL DIRECTOR / VICE 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]
(Signature of Registered Agent)
Robert E. Bowles
If signing on behalf of an entity:

9/20/99
(Date)

(Typed or Printed Name)

(Capacity)