## N98000005816

(Red	questor's Name)				
(Add	dress)	<u> </u>			
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(City	y/State/Zip/Phone	#)			
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SECRLIARY OF STATE
ALLAHASSEF FIORIN

2A Chg. 4

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: Guilford Estates Homeowners' Ass	sociation, Inc.
(Name of Corp	
DOCUMENT NUMBER: N98000005816	
The enclosed Statement of Change of Registered Office/A	agent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
	·
Richard D. Cimino, E	
(Name of Contact	ct Person)
Richard D. Cimino, P	P.A.
(Firm/Comp	
4501 Tamiami Trail N	Jorth, Suite 204
(Address	
Naples, Florida 3410	
(City/State and Z	•
For further information concerning this matter, please call:	:
Richard D. Cimino, Esq. (Name of Contact Person)	at ( 239 ) 262-1202, extension 18 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departme	ent of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chang	ge is submitted	ctions 607.0502, 617.0502 I for a corporation organiz egistered office or register	zed under the laws o	of the State of Flor	rida
	_	Guilford Estates I			
		3073 South Horseshoe Drive, Suite 118			
3. The mailing add	Iress (if differe	Naples, Florida 34	4104		
4. Date of incorpor	ration/qualifica	ation: Oct. 7, 1998	Document num	nber: N98000005	816
5. The name and se Florida Departm		f the current registered ag	ent and registered of	Mice on file with the	;
_	Donald L.	Arnold		TAL	07
_	3073 Sout	h Horseshoe Drive,	Suite 118	LAN CREE	M T
_	Naples, F	L 34104	<u></u> -	ASSE	121 121
6. The name and st (if changed):	_	f the new registered agent  -REENMAN		TATE	M IC: 56
<u>-</u>	Napl	(P.O. Box NOT acceptable) LES FL	Oaks L 34112-	-6262	
-		ed office and the street a			
Such change was a authorized by the l	nuthorized by board, or the c	resolution duly adopted corporation has been noti	Donald L.	Arnold	er so
I hereby accept the I further agree to co of my duties, and I document is being	e appointment comply with it am familiar v filed merely t cen notified in	ctor)  as registered agent and the provisions of all statut with and accept the oblig o reflect a change in the writing of this change.		or typed name and title) capacity. roper and complete n as registered age idress, I hereby con	e performance nt. Or, if this afirm that the
If signing on bchal					
(Туре	d 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