

1990000003306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

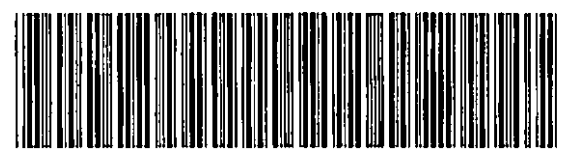
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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AUG 08 2018
T. J. FENLEY

ANO

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sunset Stream Recreation Association, Inc
Name of Corporation

DOCUMENT NUMBER: N99 00003306

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:

Marianne Wolfe
Name of Contact Person

Advanced Property Management
Firm/Company

1035 Collier Center Way #7
Address

Naples FL 34110
City/State and Zip Code

advancedprop@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laura Vandeveld at (539) 513-9433
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

July 23, 2018

MARIANNE WOLFE
1035 COLLIER CENTER WAY #7
NAPLES, FL 34110

SUBJECT: ADVANCED PROPERTY MANAGEMENT SERVICE, INC.
Ref. Number: P99000099902

We have received your document for ADVANCED PROPERTY MANAGEMENT SERVICE, 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 318A00015115

RECEIVED
18 AUG -6 PM 12:26
SECRETARY OF STATE
TALLAHASSEE FL

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: Sunset Stream Recreation, Inc.
2. The principal office address: 9150 Gallena Court, Suite 201
Naples, FL 34109
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 5/27/1999 . . . Document number: N9900003306

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)
resigned

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

**Advanced Property Management Service, Inc.**
1035 Collier Center Way #7
Naples, FL 34110

P.O. Box NOT acceptable

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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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.

DERRELL R. CAFFEY
Signature of an officer or director

DERRELL R. CAFFEY SECRETARY
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.

Laura J. Vandewelde
Signature of Registered Agent

6/17/18
Date

If signing on behalf of an entity:

Typed or Printed Name

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