

N99000004729

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 18, 2015

CAROL ANDERSON
6597 NICHOLAS BLVD.
NAPLES, FL 34108 US

SUBJECT: CAP FERRAT AT CROWN COLONY CONDOMINIUM
ASSOCIATION, INC.
Ref. Number: N99000004729

We have received your document for CAP FERRAT AT CROWN COLONY 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 registered agent must sign accepting the designation.

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.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 815A00024307

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CAP FERRAT AT CROWN COLONY CONDOMINIUM ASSOCIATION, INC
Name of Corporation

DOCUMENT NUMBER: N99000004729

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:

Carol Anderson

Name of Contact Person

Firm/Company

6597 Nicholas Blvd.

Address

Naples FL 34108

City/State and Zip Code

andersonc@questservices.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carol Anderson

Name of Contact Person

at (239) 597-6033

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

**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: CAP FERRAT AT CROWN COLONY CONDOMINIUM ASSOCIATION, INC
2. The principal office address: 6597 Nicholas Blvd, Naples, Florida 34108
3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ Document number: N 99 000004729
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)

Shock, Sandra M

6597 Nicholas Blvd

Naples, Florida 34108

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

Carol Anderson

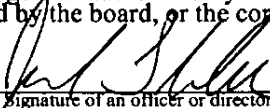
6597 Nicholas Blvd.

P.O. Box NOT acceptable

Naples, FL 34108

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.


Signature of an officer or director

Joseph Sciafani

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.


Signature of Registered Agent

11/23/15
Date

If signing on behalf of an entity:

Typed or Printed Name

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

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DIVISION OF CORPORATIONS
STATE OF FLORIDA