

P02000130789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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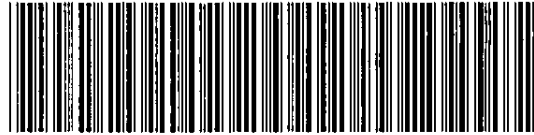
(Business Entity Name)

(Document Number)

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2009 DEC 16 P 12:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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12-22-09*

2009 DEC 21 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Treasure Cove Development Corp.  
Name of Corporation

**DOCUMENT NUMBER:** P02000130789

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:

William G. Morris  
Name of Contact Person

Law Offices of William G. Morris  
Firm/Company

247 N. Collier Boulevard, Suite 202  
Address

Marco Island, Florida 34145  
City/State and Zip Code

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

For further information concerning this matter, please call:

William G. Morris at ( 239 ) 642-6020  
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

LAW OFFICES

WILLIAM G. MORRIS

WILLIAM G. MORRIS  
ADMITTED IN FL, DC, VA

OF COUNSEL  
CONSTANCE M. BURKE

MARCO OFFICE  
247 N. COLLIER BLVD., SUITE 202  
POST OFFICE BOX 2056  
MARCO ISLAND, FL 34146-2056  
TEL (239) 642-6020  
FAX (239) 642-0722  
E-MAIL WGMORRISLAW@EMBARQMAIL.COM

NAPLES OFFICE  
TEL (239) 775-6020

December 15, 2009

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

Re: Lely Golf Villas I Limited  
Partnership  
Our File No. 09G092

To Whom It May Concern:

Accompanying please find:

1. Change of Registered Agent, and
3. Check made payable to Florida Department of State for \$35.00 for filing fee.

Thank you for your assistance.

Sincerely,

William G. Morris

WGM/ddn  
Enclosures

**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: Treasure Cove Development Corp.
2. The principal office address: 8825 Tamiami Trail, Naples, FL 34113
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 12/12/2002 Document number: P02000130789
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)

Constance M. Burke

247 N. Collier Boulevard, Suite 202

Marco Island, Florida 34145

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

William G. Morris

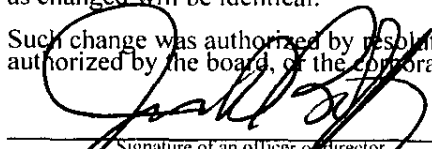
247 N. Collier Boulevard, Suite 202

P.O. Box NOT acceptable

Marco Island, Florida 34145

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 D. Boff  
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

12/15/09  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed 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

CR2E045 (8/05)

**FILED**  
2009 DEC 16 P 12:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA