

P1800006752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

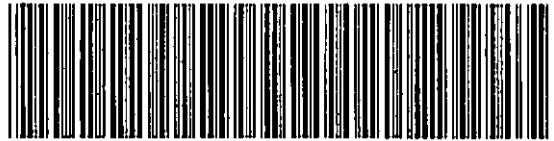
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500310874925

03/26/18--01026--008 \*\*35.00

S TALLENT  
APR 17 2018

FILED  
19 APR 16 AM 9:26

R/A-CH



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 27, 2018

ROBERT SCHUCHMAN  
NAPLES AREA REALTY, INC.  
1409 KINGS WOOD ROAD  
EAGAN, MS 55122

SUBJECT: NAPLES AREA REALTY, INC.  
Ref. Number: P18000006750

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered agent must be at a Florida street address.

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.

Susan Tallent  
Regulatory Specialist II

Letter Number: 718A00006163

RECEIVED  
18 APR 16 PM 2:49  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Naples Area Realty, Inc

Name of Corporation

**DOCUMENT NUMBER:** P18000006750

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:

Robert Schuchman

Name of Contact Person

Naples Area Realty, Inc

Firm/Company

1409 Kings Wood Road

Address

Eagan, MN 55122

City/State and Zip Code

robert@naplesarearealty.com

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

For further information concerning this matter, please call:

Robert Schuchman

Name of Contact Person

at ( 651 ) 755-6710

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: Naples Area Realty, Inc.
2. The principal office address: 3805 Cotton Green Path Drive, Naples FL 34114
3. The mailing address (if different): 1409 Kings Wood Road, Eagan MN 55122
4. Date of incorporation/qualification: 01/22/2018 Document number: P18000006750

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)

James E. Lathrop

3227 Hyde Park Drive

Clearwater, FL 33761

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

Robert Schuchman

~~1400 Kings Wood Road~~

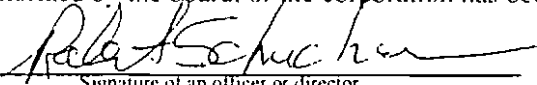
P.O. Box NOT acceptable

~~Eagan MN 55122~~

3805 Cotton Green Path Drive  
Naples, FL 34114

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

Robert Schuchman - Director

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

03/21/2018

Date

If signing on behalf of an entity:

Robert Schuchman

Typed or Printed Name

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