Division of Corporations Electronic Filing Cover Sheet

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(((H240000673563)))



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Division of Corporations

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REGISTERED AGENT CHANGE THE OLD COLLIER GOLF CLUB, INC.

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Corporate Filing Menu

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

statement of char	ige is submitted for a corporation org	9502, 607.1508, or 617.1508, Florida Statutes, this ganized under the lows of the State of Viorida distered agent, or both, in the State of Florida.	
	The Old Colline Col	•	
1. The name of t	The name of the corporation: 2. The principal office address: 2550 Goodlette Rd. N., Naples, Florida 34103		
2. The principal	office address: 2550 Goodlette Rd. F	Naptes, Plorida 34 103	 -
3. The mailing ac	ddress (if different): 3665 East Bay 1	Orive, Suite 204, MB 435, Largo, FL 33771	
4. Date of incorp	oration/qualification: 11/6/2019	Document number: 1/19000082962	
	street address of the current registere ment of State: (If resigned, enter resigned)	d agent and registered office on file with the gned)	
	Drumm, Thomas L		
			202 1
	Naples, FL 34108	A C C	FEI
Naples, FL 34108 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Business Filings Incorporated			
	Business Filings Incorporated Communication		
	1200 South Pine Island Road		9: 0 12:∑
	Plot Box NOT receptable Plantation, Florida 33324		
The street address changed will	ss of its registered office and the stre be identical.	ret address of the business office of its registered a	gent.
Such change wa authorized by th	s authorized by resolution duly adop e board, or the corporation has been	oted by its board of directors or by an officer so notified in writing of the change.	
\checkmark	William Thomas, Vice President		
Signatur	e of an officer or director	Printed or typed name and title	
I hereby accept if further agree to of my duties, and document is being corporation has		and agree to act in this capacity. tatutes relative to the proper and complete perform obligation of my position as registered agent. Or, the registered office address, I hereby confirm the ge.	nance if this it the
Mande.	8th day of February, 2024		
Sign	ature of Registered Agent	Date	
If signing on bel	nalf of an entity:		
	of Business Filings Incorporated		
1)		FEE: \$35.00 * * *	
MF CR2E045 (04'13)	MAKE CHECKS PAYABLE TO I	FLORIDA DEPARTMENT OF STATE I. P.O. BON 6327, TALLAHASSEE, FL 32314	