

P 930000 10513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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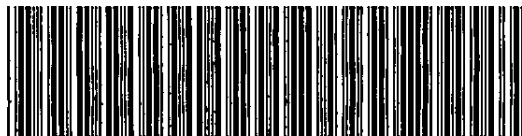
(Business Entity Name)

(Document Number)

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

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STATEMENT OF SERVICE  
TALLAHASSEE, FLORIDA

*rk Chg*  
JUN 01 2016

R. WHITE

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** W.M. ZANI REALESTATE CONSULTING, INC.  
Name of Corporation

**DOCUMENT NUMBER:** P

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 ZANI  
Name of Contact Person

W.M. ZANI REALESTATE CONSULTING, INC  
Firm/Company

1581 NORFOLK AV  
Address

THE VILLAGES, FL 32462  
City/State and Zip Code

BILLZANI2@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLIAM ZANI at (352) 215-2636  
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

DOCUMENT# P93000010513

**Entity Name:** W.M. ZANI REAL ESTATE CONSULTING INCORPORATED

**Current Principal Place of Business:**

1111 BRICKELL BAY DR  
APT #2712  
MIAMI, FL 33131

**Jan 21, 2016**  
**Secretary of State**  
**CC1443310795**

**Current Mailing Address:**

1111 BRICKELL BAY DR  
APT #2712  
MIAMI, FL 33131 US

**FEI Number:** 65-0376893

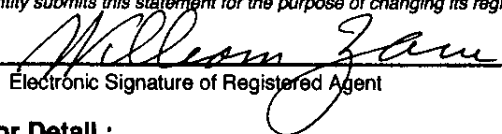
**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ZANI, WILLIAM  
1111 BRICKELL BAY DR  
APT #2712  
MIAMI, FL 33131 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

  
Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CTS  
Name ZANI, ANN  
Address 1111 BRICKELL BAY DR  
APT #2712  
City-State-Zip: MIAMI FL 33131

Title P  
Name ZANI, WILLIAM M.  
Address 1111 BRICKELL BAY DR  
APT #2712  
City-State-Zip: MIAMI FL 33131

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** ZANI, WILLIAM M.

 PRESIDENT

01/21/2016

Electronic Signature of Signing Officer/Director Detail

Date

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: W.M. ZANI REAL ESTATE CONSULTING, INC
2. The principal office address: 11
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: \_\_\_\_\_
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)

WILLIAM ZANI  
1111 BRICKELL BAY DR APT 2712  
MIAMI, FL 33131

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

WILLIAM ZANI  
1581 NORFOLK AV  
P.O. Box NOT acceptable  
THE VILLAGES, FL 32162

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TALLAHASSEE, FLORIDA

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.

William M Zani  
Signature of an officer or director

WILLIAM ZANI, PRESIDENT  
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.

William M. Zani  
Signature of Registered Agent

5/25/2016  
Date

If signing on behalf of an entity:

WILLIAM M. ZANI  
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