

Requester's Name  
 Address  
 City/State/Zip Phone #

**P98000098960**

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) **800004486118--7**  
 -07/19/01--01065--002  
 \*\*\*\*\*70.00 \*\*\*\*\*35.00
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

**FILED**  
 01 JUL 19 PM 3:09  
 SECRETARY OF STATE  
 ALABAMA

**P98000098960**  
**RA ON 7-19-01**  
**268 ON**

**Examiner's Initials**

**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, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : GULFCOAST PROPERTIES OF NAPLES, INC.

2. The mailing address of the corporation : 2154 TRADE CENTER WAY, SUITE 2  
NAPLES FLORIDA 34109

3. Date of incorporation/qualification: 11/23/98 Document number: P98000098960

4. The name and address of the current registered agent and office:

VICTOR MISKANIC  
2154 TRADE CENTER WAY, Suite 2  
NAPLES FLORIDA 34109

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P. O. Box Not Acceptable)

DANIEL M. CAVANAUGH  
1250 TAMiami TRAIL NORTH, SUITE 201  
NAPLES FLORIDA 34102

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 authorized by the board.

(Signature of an officer, chairman or vice chairman of the board)

VICTOR MISKANIC

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

(Signature of Registered Agent)

7-17-01  
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

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06 JUL 19 PM 3:09  
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