

P99000103449

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

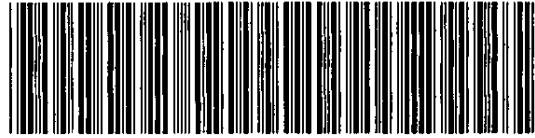
(Business Entity Name)

(Document Number)

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*Re change  
Fees  
8-21-08*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Bay West at Tower Park, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P99000103449

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:

Stacey Gillman  
(Name of Contact Person)

Bay West  
(Firm/Company)

PO Box 2639  
(Address)

Sarasota, FL 34230  
(City/State and Zip Code)

For further information concerning this matter, please call:

Stacey Gillman at ( 941 ) 355-8000  
(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

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.

- Sarasota, FL34234

- Sarasota, FL 34240

(Printed or typed name and title)

8/12/08  
(Date)

CR2E045 (8/05)

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