

## Statement of Change of Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of RIGL <u>7-6-13</u> or <u>7-6-78</u> the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

statement for the purpose of cl	nanging its registered agent in	the State of Rhode Island:	5 - 7
1. Entity ID Number	2. Exact Name of the Corporation		
000977949	CASTLE ROCK CONDOMINIUM ASSOCIATION, INC.		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address PERRINO & ASSOCIATES 100 JEFFERSON BOULEVARD, SUITE 205			
City/Town WARWICK		State RHODE ISLAND	Zip 02888
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
BARBARA PERRINO			
5. The address of the <b>NEW</b> registered office is:			
Street Address (NOT a P.O. Box) 14 Breakneck Hill Road, Suite 203			
City/Town Lincoln		State RHODE ISLAND	<sup>Zip</sup> <b>02865</b>
6. The name of the <b>NEW</b> regis	stered agent is:		
Goodman, Shapiro & Lombardi, LLC			
7. The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical.			
8. The change was authorized by a resolution duly adopted by its board of directors.			
	lare and affirm that I have exa ments contained herein are tru		ge of Registered Agent by the
Name of President/Vice President of the Corporation			Date
Ernest H. Mª Questan Jr			10/6/16
Signature of President/Vice Pr	esident of the Corporation		
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MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED ~

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FORM 641 - Revised: 06/2016