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**EXAMINER** 

#### **COVER LETTER**

Division of Corporations SUBJECT: Shoreline Towers Phase I Condominium Association Name of Corporation 727647 DOCUMENT NUMBER: 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: Judith Williams Name of Contact Person Shoreline Towers Phase I Condominium Association, Inc. Firm/Company 900 Gulf Shore Drive Address Destin, FL 32541 City/State and Zip Code shorelinetowers1@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judith Williams at ( 850 ) 837-7411
Area Code & Daytime Telephone Number Name of Contact Person 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

TO:

Amendment Section

Amendment Section Division of Corporations

TO:

## **COVER LETTER**

Subtract. Sho	reline Towers Phase I C	ondominium Associa	ation
,	Name of	Corporation	
DOCUMENT NUI	MBER:	727647	·
The enclosed States	nent of Change of Registered Off	ice/Agent and fee are submit	tted for filing.
Please return all con	respondence concerning this mat	er to the following:	
	مانالم رو	Milliamo	
-	Name of C	Williams Contact Person	
	Shoreline Towers Phase I C		on, Inc.
	Firm/	Company	
		Shore Drive	
	,	101033	
	Destin	FI 32541	
	City/State	FL 32541 and Zip Code	
	ah ayalin atau	nrof@ool.com	
_	E-mail address: (to be used for	ers1@aol.com future annual report notif	fication)
	·	·	·
For further informa	tion concerning this matter, please	e call:	
	Judith Williams	at ( 850 )	837-7411
	ne of Contact Person	Area Code & Dayti	837-7411 me Telephone Number
Enclosed is a \$35.0	0 check made payable to the Depa	artment of State.	
	Mailing Address: Amendment Section	Street Address: Amendment Se	·
	Amendment Section Division of Corporations	Amendment Se Division of Co	
	P.O. Box 6327	Clifton Buildin	-

Tallahassee, FL 32314

2661 Executive Center Circle

Tailahassee, FL 32301



### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 2, 2011

JUDITH WILLIAMS SHORELINE TOWERS PHASE I CONDOMINIUM 900 GULF SHORE DR DESTIN, FL 32541

SUBJECT: SHORELINE TOWERS PHASE I CONDOMINIUM ASSOCIATION,

INC.

Ref. Number: 727647

We have received your document for SHORELINE TOWERS PHASE I CONDOMINIUM ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

I am enclosing the proper form for you to changes officers/directors on your corporation, you submitted the wrong form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 411A00024979

# Articles of Amendment

Articles of Incorporation

οf

Shoreine Towers Ph	lase 1 Condominium	<u>\ As</u> socia	hon, I
	ntly filed with the Florida Dept. of St.	<u>ate</u> )	
Consument Num	ber of Corporation (if known)	<del></del>	
Pursuant to the provisions of section 617.1006, I the following amendment(s) to its Articles of Inc.		rofit Corporation ad	opts
A. If amending name, enter the new name of	the corporation:		
The new name must be distinguishable and co abbreviation "Corp." or "Inc." "Company" or		orporated" or the	
B. Enter new principal office address, if appl	licable:		
(Principal office address <u>MUST BE A STREE:</u>	<u>(ADDRESS)</u>		, sk. 1 1911 1812
			NO S
C. Enter new mailing address, if applicable:	TR MAY!		<b>교</b> 중
(Mailing address <u>MAY BE A POST OFFIC</u>	E BUX)		
			<b>10</b>
			<b>文</b> 等产
D. If amending the registered agent and/or re		ter the name of the	. at.
new registered agent and/or the new regis	teren omice andress:		
Name of New Registered Agent:		_	
New Registered Office Address:	(Florida street address)	_	
		. Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changin	g Registered Agent:		
I hereby accept the appointment as registered position.		pt the obligations of	<sup>°</sup> the
Si	ignature of New Registered Agent, if cha	anging	

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	<u>Name</u>	Ado	lress
1) <u>PD</u>	Gregory O' Brie	900 ( Desh)	julf Shore P1 1/21 FC 32541
2) \ P	Norma Freene	goo G	ulf Share D1 # 3112 FL 32541
3) 🔼	John Warburt	on goo	gulf Shore 01 1 3084 Fr 32541
4 <u>) D</u>	Elliot Marcus	goe c Desti-	Jul Share DI N 1026
5 <u>) DT</u>	Frederick Palot	ta 251	Hunting Creek Drive
6) [	Anthony Michel	II 4001 Chalm	Jean Lafitte Parkway
1) D  If REMOVING an removed:	Gary Ealey officer and/or director, please li	st the title(s) and no	Way walks Drive ame of the officer/director to be
Title(s)	<u>Name</u>	Title(s)	<u>Name</u>
<u>Ta (1</u>	William Ginger	4)	
2)		5)	
3)		6)	

f amending or adding additional Art attach additional sheets, if necessary).	(Be specific)	<del>-</del>	
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. The date of each amendment(	s) adoption: 1 8 2011 (date of adoption- required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or me adopted by the board of direct	embers entitled to vote on the amendment(s). The amendment(s) was/were extors.
have	the chairman or vice chairman of the board, president or other officer-if directors in not been selected, by an incorporator – if in the hands of a receiver, trustee, or recourt appointed fiduciary by that fiduciary)  Tudith Mulliams  (Typed or printed name of person signing)
	(Title of person signing)