741183

(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Sea Palms Condominium	Association, Inc.		
(Name of Corporation)			
DOCUMENT NUMBER: 741183			
The enclosed Statement of Change of Register	ered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning t	his matter to the following:		
Mark R. McMullen			
— (Na	ume of Contact Person)		
Sachs & Sax			
(Firm/Company)			
1850 SW Fountainview	Blvd., Ste. 207 (Address)		
Port Saint Lucie, FL 349	ty/State and Zip Code)		
For further information concerning this matter	er, please call:		
Mark R. McMullen (Name of Contact Person)	at (772) 871-8020 (Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to	the Department of State.		
Mailing Address: Amendment Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	rations Division of Corporations Clifton Building		

TO:

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: Sea Palms Condominium Association, Inc.
2. The principal office address: 3200 N. A1A, FT. PIERCE FL 34949
3. The mailing address (if different):
4. Date of incorporation/qualification: 12/22/1977 Document number: 741183
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
DEBORAH L. ROSS, ESQ., C/O ROSS EARLE & BONAN, PC
759 S FEDERAL HIGHWAY, SUITE 212
STUART, FL 34994 US
759 S FEDERAL HIGHWAY, SUITE 212 STUART, FL 34994 US 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Mark R. McMullen, c/o Sachs & Sax
Mark R. McMullen, c/o Sachs & Sax
1850 SW Fountainview Blvd., Ste. 207
(P.O. Box NOT acceptable) Port Saint Lucie, FL 34986
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.
(Signature of an officer or director) Cacol G. Clements 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.
(Signature of Registered Agent) (Date)
(Signature of Registered Agent) (Date) If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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