756749

(Requ	estor's Name)		_
(Addre	ess)			_
(Addre	ess)			_
(City/S	State/Zip/Pho	ne #)		_
PICK-UP	MAIT	.	MAIL	
(Busir	ess Entity Na	ame)		_
(Docu	ment Numbe	r)		
Certified Copies	Certificate	es of S	tatus	_
Special Instructions to Fil	ing Officer:			7

Office Use Only



200075991502

06/09/06--01023--002 **35.00

06 JUN-9 PM 1:48
SECRETARY OF STATE
AND AHASSEE, FLORID

Roman Shark

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Islandia I Condominium Association, Inc. (Name of corporation)
DOCUMENT NUMBER: 756749
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:
Richard W Mullen (Name of person)
Islandia I Condominium Association, Inc (Name of firm/company)
9550 S. Ocean Dr (Address)
Jensen Beach, Fl 34957 (City/state and zip code)
For further information concerning this matter, please call:
Sandy Cardenas at (772) 229-3591 (Name of person) (Area code & daytime telephone number)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Enclosed is a \$35.00 check made payable to the Department of State.

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: Islandia I Condominium Association, Inc.
2. The principal office address: 9550 S. Ocean Dr.
Jensen Beach Fl 34957
3. The mailing address (if different): Same
4. Date of incorporation/qualification: March 13, 1981 Document number: 756749
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Chauncey E Huber
4550 S. Ocean Dr. #1910
Jensen Beach, Fl 34957
6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed): Richard W. Mullen 75 8
5092 SF Post Terrace
(P.O. Box or personal mailbox NOT acceptable)
770ac+, P1 34991
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 office of its registered.
Such change was authorized by resolution duly adopted by its board of directors or by an officerso authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an officer, chairman or vice chairman of the board) (Printed or typed name and title)
(Signature of an officer, chairman or vice chairman of the board) [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.
() All () () () () () () () () () () () () ()
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
** * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State and Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314