N0400005505

n		
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
•		
(Bu	isiness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

Amendment Section Division of Corporations Malibu Condominiums Association, Inc. SUBJECT: (Name of Corporation) N04000005505 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: Lynn Becker, CAM (Name of Contact Person) Southeast Management (Firm/Company) 3280 S. Atlantic Ave. (Address) ' Daytona Beach Shores, FL 32118 (City/State and Zip Code) For further information concerning this matter, please call: Lynn Becker, CAM (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:

• STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•					7.1508, Florida Si of the State of _	tatutes, this Florida
-	_	•	-		in the State of <u> </u>	
1. The name of t	the cornoration	Malibu	Condomi	niums Ass	sociation,	Inc.
2. The principal	•			ic Ave.,		
	Beach Sho			<u> </u>		
3. The mailing a	ddress (if differe	nt):	NA			
4. Date of incorp	ooration/qualifica	ntion: 06/0	2/2004	Document nu	mber: N0400	0005505
	l street address of tment of State: (l			and registered	office on file with	h the
	Robert	S. Thurl	-OW			. 0
	415 Ca	nal St.				NISICA SECR
	New Sm	yrna Beac	h, FL 3	2168		基
6. The name and (if changed):	Lynn Beck Southeas: 3280 S. Daytona	ker, CAM t Managem Atlantic (P.O. Box NO)	Avenue		or registered office	SECRETARY OF CORPORAL 23 ON MAR 12 AM 11: 23
The street addre as changed will	ss of its register be identical.	ed office and t	he street addı	ess of the busi	iness office of its	s registered agent,
Such change wa authorized by th	is authorized by ne board, or the	resolution duly corporation has	y adopted by s been notifie	its board of di d in writing of	rectors or by an the change.	officer so
(Signatu	ire stan ornicer or dire	ector)			J. Koch, D	
			agent and ag of all statutes of the obligati nge in the reg s change.	ree to act in the relative to the on of my posit gistered office	nis capacity. proper and com ion as registered address, I hereb	plete performance I agent. Or, if this y confirm that the
	Lynn Becl	ker, CAM		3/10/	/09	
(Sig	nature of Registered A	Agent)			(Date)	.,.
If signing on bel	half of an entity	:				
(T	Lynn Bec.					
(.	y	,	ING FEE: S	635.00 * * *		

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