

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



200263707732

08/28/14--01004--019 **35.00

SEP -4 2014

R. WHITE

COVER LETTER

Division of Corporations
SUBJECT: Kings Colony Homeowners Association, Fre
DOCUMENT NUMBER: NO4592
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:
Marc Bella of Contact Person
Watson Realty Corp Association Management
1410 Palm Coast Perkway NW Address
Palm Coast, FL 32137 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Marc Bella pianta at (386) 346-9272 Name of Confact Person Area Code & Daytime Telephone Number
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

* 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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Kings Colony Home owners ASSOL. Inc
2. The principal office address: 1 Kings Colony Court
Palm Coast, FL 32137
3. The mailing address (if different): PO Box 351273
Palm Coast, FL 32135
4. Date of incorporation/qualification: 10 4 2013 Document number: NO4592
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Flagler Palm Coast Property Management, Inc.
50 Leanni Way Suite B6
Palm Coast FL 32137
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Watson Realty Corp. Association Management
1410 Palm Loast Parkway NW PO BOX NOT acceptable
Palm Coast, FL 32137
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.
Nuctor Carniforno VICTOR CANNIZZARO AUT. SEC. Signature of an officer of thector 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.
8-2G-14
Signature of Registered Agent Date
If signing on behalf of an entity:
MARC BELLAPIANTA Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

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