115619

Requestor's Name Sanctuary by the Sea HOA Inc. 2255 Mockingbird Lane Indialantic, FL 32903 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. (Corporation Name) (Document #) 2. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Certified Copy □ Walk in Certificate of Status ☐ Will wait Photocopy Mail out AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS OUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary 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, the undersigned corporation organized under the laws of the State of Eugline both, in the State of Florida.

a. The name of the corporation is:	INC.
o. The mailing address of the corporation is : 22	55 HOCKINGBIRD LANG
INDIALANTIC , FL 32903	
:. Date of incorporation: 6 2 2 8 6	Da
The name and address of the current registered	ed agent and office: 全国 马
STEWART CAPPS	TANY O
HWY AIA, ST	E 202
INDIALANTIC, FL 3290	TARY OF STATE HASSEE, FLORID
	867 9
The name and address of the new registered ago	ent and office:(P.O. Box Not Acceptable)
CAROLYN HORRISON	
2255 MOCKINGBIRD LAN	E
INDIALANTIC, FL 32	903
street address of its registered office and it	e street address of the hadran
h change was authorized by resolution duly ado outhorized by the board.	pted by its board of directors or by an offic
The Male	
(Signature of an officer, chairman or yice chairman of the board)	10-7-58
in the first the	(Date)
(Printed or typed name and title)	
ing been named as registered agent and to accoration, I hereby accept the appointment as region and the comply with the provisions of all armance of my duties, and I am familiar with the agent.	
CM	10-7-98·
(Signature of Registered Agent)	(Date)
ning on behalf of an entity:	.
(Typed or Printed Name)	(Capacity)

Division of Corneration