N9800005015

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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TALLA STATE TRIDA

SEP 04 2014 T. CARTER

COVER LETTER

TO: Amendment Section **Division of Corporations** BROOKEHAVEN AT WATERFORD HOMEOWNERS ASSOCIATION, INC. **SUBJECT** Name of Corporation N98000005015 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: Desiree Lindahl Name of Contact Person Soundview Property Management Firm/Company 333 17th Street, Suite A Address Vero Beach, FL 32960 City/State and Zip Code desiree@soundviewmgt.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Desiree Lindahl Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State.

55.00 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

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Ω inge is submitted for a corporation organized under the laws of the State of Ω	FL	this	_
	r to change its registered office or registered agent, or both, in the State of F			
1. The name of t	he corporation: BROOKEHAVEN AT WATERFORD HOMEOWNERS	ASSOCI	ATIO	N, INC.
	office address: C/O SOUNDVIEW PROPERTY MANAGEM	ENT		
	STREET, SUITE A, VERO BEACH, FL 32960			
3. The mailing a	ddress (if different): SAME AS PRINCIPAL ADDRESS			
4. Date of incorporation/qualification: 08/28/1998 Document number: N9800005015				
	street address of the current registered agent and registered office on file witment of State: (If resigned, enter resigned)	ith the		
	SOUNDVIEW PROPERTY MANAGEMENT			
	2095 INDIAN RIVER BLVD			
	VERO BEACH, FL 32960			S
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered of	fice	4 AUG 22	ECRETATION TO A
	SOUNDVIEW PROPERTY MANAGEMENT			ASSET
	333 17TH STREET, SUITE A		F	
	P.O. Box NOT acceptable VERO BEACH, FL 32960		05	
				1 >
-	ss of its registered office and the street address of the business office of its be identical.			ent,
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an of e board, or the corporation has been notified in writing of the change.	officer so)	
Signatur	e of an officer or director Printed or typed name and title			
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and com my duties, and I am familiar with and accept the obligation of my position s document is being filed merely to reflect a change in the registered office that the corporation has been notified in writing of this change.	plete as regis e addres	tered s, I	
_ Que	Jan 8/14/19	<u> </u>		_
J	nature of Registered Agent Date			
It signing on bel	nalf of an entity:			
Ту	ped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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