

748109

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 30 2015
A RAMSEY

COVER LETTER

TO: Amendment Section *
Division of Corporations

SUBJECT: Halifax Villas Condominium Association
Name of Corporation

DOCUMENT NUMBER: FEIN 591936674

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:

KAREN Fanning 502-296-4636
Name of Contact Person

Firm/Company

144 S. Halifax Avenue
Address

Daytona Beach, FL 32118
City/State and Zip Code

Halifax Villa Condo@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KAREN Fanning at (502) 296-4636
Name of Contact Person Area Code & Daytime Telephone Number
OFFICE 386-252-8068

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

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: Halifax Villas Association, Inc.
- 2. The principal office address: 144 S. Halifax Avenue
Daytona Beach, FL 32118
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: _____ Document number: 748109

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)

Steve BROWN
144 S. Halifax Avenue #20
Daytona Beach, FL 32118

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Paul Thomas
144 S. Halifax AVE. #64
P.O. Box NOT acceptable
Daytona Beach, FL 32118

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STATE DEPARTMENT OF STATE

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.

Paul Thomas
Signature of an officer or director

PAUL THOMAS, VICE PRESIDENT
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.

Paul Thomas
Signature of Registered Agent

June 18, 2015
Date

If signing on behalf of an entity:

HALIFAX VILLA CONDO ASSOC
Typed or Printed Name

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