

N125000005520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

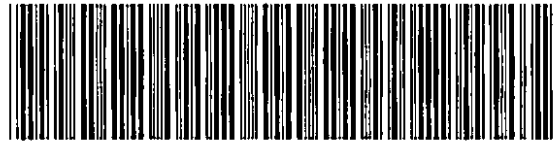
(Business Entity Name)

(Document Number)

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JAN 24 PM 12:07
TALLAHASSEE, FLORIDA

JAN 28 2019
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 10, 2019

DAVID HOFFMAN
OMEGA COMMUNITY MANAGEMENT, INC
7145 TURNER ROAD STE 101
ROCKLEDGE, FL 32955

SUBJECT: EMERALD PARK CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N05000005520

We have received your document for EMERALD PARK CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 519A00000784

RECEIVED

2019 JAN 24 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FL

you

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Emerald Park Condominium Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N05000005520

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:

David Hoffman

Name of Contact Person

Omega Community Management, Inc.

Firm/Company

7145 Turner Road, Suite 101

Address

Rockledge, Florida 32955

City/State and Zip Code

dhoffman@omegacmi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Hoffman

Name of Contact Person

at (**321**) **757-7902**

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

**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: Emerald Park Condominium Association, Inc.
2. The principal office address: 7145 Turner Road, Suite 101
Rockledge, Florida 32955
3. The mailing address (if different): 7145 Turner Road, Suite 101
Rockledge, Florida 32955
4. Date of incorporation/qualification: 05/26/2005 Document number: N05000005520
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)
Kenney, James
1331 Bedford Drive, Suite 103
Melbourne, Florida 32940
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Omega Community Management, Inc.
7145 Turner Road, Suite 101
P.O. Box NOT acceptable
Rockledge, Florida 32955

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19 JAN 24 PM 12:07
TALLAHASSEE, FLORIDA

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.

Elizabeth Boileau
Signature of an officer or director

ELIZABETH BOILEAU
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.

Doreen Hoffman
Signature of Registered Agent

12-01-2018

Date

If signing on behalf of an entity:

Elizabeth Boileau
Typed or Printed Name

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