I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

VICE PRESIDENT

SIGNATURE: SANDRA SPENCER

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N14000010960

Entity Name: DUNES OF AMELIA OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

414 OLD HARD ROAD SUITE 502 FLEMING ISLAND, FL 32003

Current Mailing Address:

414 OLD HARD ROAD SUITE 502 FLEMING ISLAND, FL 32003 US

FEI Number: 47-2452947

Name and Address of Current Registered Agent:

FLORIDIAN PROPERTY MANAGEMENT, LLC 414 OLD HARD ROAD SUITE 502 FLEMING ISLAND, FL 32003 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE:

Ele

Electronic Signature of Registered Agent	

Officer/Director Detail :

Title	DP	Title	DVT			
Name	WOOD, SUSAN D	Name	SPENCER, SANDRA S			
Address	414 OLD HARD ROAD; SUITE 502	Address	414 OLD HARD ROAD; SUITE 502			
City-State-Zip	: FLEMING ISLAND FL 32003	City-State-Zip:	FLEMING ISLAND FL 32003			
Title	DS					
Name	HIGGINS, MICHAEL					
Address	414 OLD HARD ROAD SUITE 502					
City-State-Zip	: FLEMING ISLAND FL 32003					

ning Officer/Director Datail



Certificate of Status Desired: No

04/09/2019 Date

Date