## 277616

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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SECRETARY OF STATE: TALLAHASSEE, FLORIDA

DEC 1 3 2016 T. LERGEUX



## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: HERNANDO BEACH INC. Name of Corporation			
DOCUMENT NUMBER: 2776/6			
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 C. SASSER  Name of Contact Person			
Firm/Company			
POBOX 12250  Address  BROOKSVIVE FU 34603  City/State and Zip Code			
BROOKSVIVE FU 34603 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
DAVID C. SASSER at (353, 443 - 0810  Name of Contact Person Area Code & Daytime Telephone Number			
Name of Contact Person Area Code & Daytime Telephone Number			
England in a \$25.00 should made another to the December of State			

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

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

statement of change is submitted for a corporation organized under the laws of the State of Library
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Hernando Beach, Inc.
2. The principal office address: 29 5. BROOKSVILLE AVE.
DEBOKSVILLE FL 34601
3. The mailing address (if different): PO BOX 12250 Brooksville FL 34603
4. Date of incorporation/qualification: 1/21/1964 Document number: 2776/6
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)
DAVID C. SASSER
140 S. MAIN ST
BROOKSVILLE FL 34601
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Reg agent - No Change Find B 29 S. BROCKSVILLE AVE.  P.O. BOX NOT acceptable  BROCKSVILLE FL 34601
P.O. Box NOT acceptable
BROOKSVILLE FL 34601
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 of the corporation has been notified in writing of the change.
Signature of an officer or director  DAVID C. SASSER PRES  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.
Signature of Registered Agent  Dec. 7, 2016  Date
If signing on behalf of an entity:
Typed or Printed Name

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