

702047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

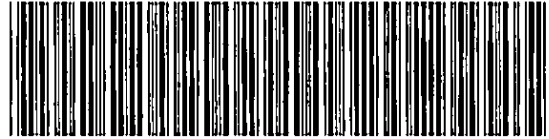
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JUL 10 2018
ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ST ANDREWS BAY YACHT CLUB, INC.
Name of Corporation

DOCUMENT NUMBER: 702047

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:

DON WALTON, MANAGER

Name of Contact Person

ST ANDREWS BAY YACHT CLUB, INC.

Firm/Company

218 BUNKERS COVE ROAD

Address

PANAMA CITY, FL 32401

City/State and Zip Code

DON@STABYC.COM

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

For further information concerning this matter, please call:

ANN LEGER

Name of Contact Person

at (850) 769-2453

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: ST ANDREWS BAY YACHT CLUB, INC.
2. The principal office address: 218 BUNKERS COVE ROAD
PANAMA CITY, FL 32401
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/22/1961 Document number: 702047
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)

WILLIAM B STEINER CPA, STEINER & COMPANY PA
1714 W 23RD ST, STE A
PANAMA CITY, FL 32405

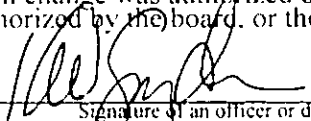
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

WILLIAM C CRAMER, III
2251 W. 23RD ST
P.O. Box NOT acceptable
Panama City, FL 32405

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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.

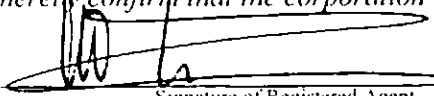


Signature of an officer or director

KEITH W SNYDER, IMMEDIATE PAST CHAIRMAN

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

6/27/2018

Date

If signing on behalf of an entity:

Typed or Printed Name

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