	715371
(Requestor's Name) (Address) (Address)	800337422328
(City/State/Zip/Phone #)	12/16/1901014005 **35.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	19 OFC 16 AND FATE
Office Use Only	

RA Change

JAN 1 6 2020 D CUSHING

COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: Tropic Harbor Association, Inc.

Name of Corporation

715371 DOCUMENT NUMBER

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:

Robert Hayes		
Name of Contact Person		
Campbell Property Management		
Firm/Company		
800 Tropic Isle Drive		
Address		
Delray Beach, FL 33483		
City/State and Zip Code		
rhayes@campbellproperty.com	 	-
E-mail address: (to be used for future annual report notification)	19 N.C	
	5	
For further information concerning this matter, please call:	100	<u> 2000</u>

Robert Hayes	
--------------	--

Name of Contact Person

561 278-8192

Enclosed is a \$35.00 check made payable to the Department of State.

at (

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

CR2E045 (03/12)

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: Tropic Harbor Association, Inc.

2.	The principal office	addr	.ess: 800	Tropic	Isle	Drive
	Deless Deeeb					

Delray Beach, FL 33483

3. The mailing address (if different): Same

4. Date of incorporation/gualification: 10/07/1968 Document number: 715371	
--	--

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)

Mollengarden, Peter C.

9121 No. Military Trail, Suite 2000

Palm Beach Gardens, FL 33410

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

Kaye Bender Rembaum, P.L.	
1200 Park Central Blvd. South	
P.O. Box NOT acceptable	
Pompano Beach, FL 33064	

_. . _ _ _

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 cauthorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply will the provisions of all statutes relative to the proper and complete performance of my duries, 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 If signing on behalf of an entity: Peter C. Mollengarden, Esq Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)