

724289

(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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S TALLENT
MAY 07 2018

FILED
18 MAY -3 2018:19

R/A-CH



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 19, 2018

GARY L. SMITH
BAYSHORE CLUB MANAGEMENT ASSOCIATION, IN
925 N. HALIFAX AVE. #106S
DAYTONA BEACH, FL 32118

SUBJECT: BAYSHORE CLUB MANAGEMENT ASSOCIATION, INC.
Ref. Number: 724289

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The registered agent must sign accepting the designation.

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.

Susan Tallent
Regulatory Specialist II

Letter Number: 618A0000097

RECEIVED
18 MAY -3 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: _____
Name of Corporation

DOCUMENT NUMBER: 724289

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:

Gary L. Smith

Name of Contact Person

Bayshore Club Management

Firm/Company

925 N. Halifax Ave #106S

Address

Daytona Beach, FL 32118

City/State and Zip Code

bcmaoffice@gmail.com

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

For further information concerning this matter, please call:

Gary L. Smith

Name of Contact Person

at **386 255-3686**

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Bayshore Club Management Association, Inc.
2. The principal office address: 925 North Halifax Avenue, #106
Daytona Beach, Florida 32118
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/06/1972 Document number: 724289

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)

Gary L Smith

925 N. Halifax Ave #201S

Daytona Beach, FL 32118

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

Gary L Smith

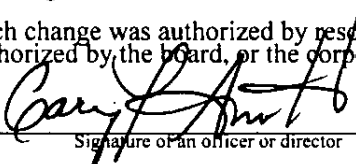
925 N. Halifax, #106S

P.O. Box NOT acceptable

Daytona Beach, FL 32118

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

Gary L. Smith, Association Preside

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

April 30, 2018

Date

If signing on behalf of an entity:

Gary L. Smith

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)

FILED
18 MAY -3 AM 11:19