725850

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(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

Amendment Section Division of Corporations

Elizabeth Mc Donnell

TO:

SUBJECT: MARINER CONDO. ASSOCIUC Name of Corporation		
DOCUMENT NUMBER: 735850		
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:		
PAM Fi KE Name of Contact Person		
Name of Contact Person		
Presiben T Firm/Company		
1985.1479 St Unit E		
Address		
Coco Beach FL. 3293/ City/State and Zip Code Fixe. pam O gmoil o Com E-mail address: (to be used for future annual report notification)		
City/State and Zip Code		
tike Dam O amail o COM		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Contact Person Area Code & Daytime Telephone Number		
Name of Contact Person Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Amendment Section Street Address: Amendment Section		
Amendment Section Amendment Section Division of Corporations Division of Corporations		
P.O. Box 6327 Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle		
Tallahassee, FL 32301		
CR2E045 (03/12)		

Han Fredric

Orlando

'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.
1. The name of the corporation: MAINIET CONDO ASSOC INC 2. The principal office address: 198 S. 14Th St
Cocoa Buch FL. 32931
3. The mailing address (if different): 198 5. 14Th St Unit E Cocoo Brech FL 32931
4. Date of incorporation/qualification: 3/20/73 Document number: 725850
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) Erick Son, Vicki
Merritt Island FL 3295Z
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): PAM Fike 198 \$ 1479 \$ + Unit E P.O.BOX NOT acceptable Cocoa Black FL 3293/
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. Phoned 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 If signing on behalf of an entity: MACINE CONDO ASSOC INS Typed or Printed Name

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