

726748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

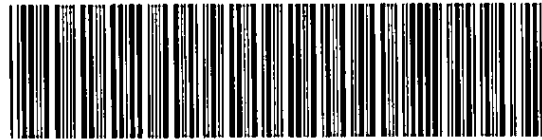
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

At 10/21

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Crescent Beach Ocean House Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 726748

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:

Nancy Ridley
Name of Contact Person

Crescent Beach Ocean House Association, Inc
Firm/Company

1870 AIA S
Address

St. Augustine, FL 32080
City/State and Zip Code

E-mail address: office@oceanhouserentals.com
(to be used for future annual report notification)

For further information concerning this matter, please call:

Nancy Ridley at (904) 327-2495
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
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Crescent Beach Ocean House Association, Inc.
2. The principal office address: _____

3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ Document number: _____

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)

Nancy Ridley
~~7870 AIA S~~ 461 AIA Beach Blvd.
~~St. A~~ St. Augustine, FL 32080

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

7870 AIA S
St. Augustine, FL 32080

P.O. Box NOT acceptable

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.

Nancy J. Ridley
Signature of an officer or director

Nancy J. Ridley President
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.

Nancy J. Ridley
Signature of Registered Agent

2/24/2021
Date

If signing on behalf of an entity:

Nancy J. Ridley
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 (04/13)

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