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COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: Mission Oaks Condominium Association, Inc.

Name of Corporation

729125 **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:

Bennett L. Rabin	
Name of Contact Person	
Rabin Parker, P.A.	
Firm/Company	
28059 U.S Hwy 19 North, Suite 301	
Address	
Clearwater, Florida, 33761	
City/State and Zip Code	
kcate@resourcepropertymgmt.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Bennett L. Rabin

at (727) 475-5535 Area Code & Daytime Telephone Number

Name of Contact Person

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

CR2E045 (03/12)

RECEIVED JUL 3 0 2018

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 <u>Florida</u> in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Mission Oaks Condominium Association, Inc.

2. The principal office address: Resource Property Management 7300 Park Street, Seminole, Florida, 33777

4. Date of incorporation/qualification: 03/14/1974 Document number: 729125

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)

Greenberg, Daniel J

1964 Bayshore Blvd.,

Dunedin, FL 34698

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

Rabin Parker, P.A.

28059 U.S Hwy 19 North, Suite 301

P.O. Box_NOT acceptable

FILEL

Clearwater, Florida, 33761

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.

Treasurer Suran Shepard wan Signature of an officer or director

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:

read 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)