

737471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

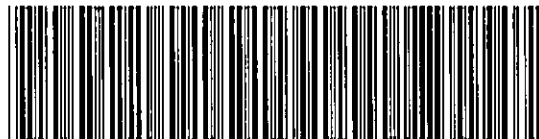
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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AUG 05 2020

S. YOUNG

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BAY CLUB ON ST. ANDREWS BAY ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: 59-1772718

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:

Philippa Walker

Name of Contact Person

Firm/Company

316 CHERRY ST

Address

Panama City, FL 32401

City/State and Zip Code

ktownsend@handfirm.com

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

For further information concerning this matter, please call.

Philippa Walker

Name of Contact Person

at (850)

596-2686

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

1. The name of the corporation: BAY CLUB ON ST. ANDREWS BAY ASSOCIATION, INC.
2. The principal office address: 316 Cherry Street, Panama City, FL 32401
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/07/1976 Document number: 737471
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)

Richardson, Darlene

316 CHERRY ST, #40

PANAMA CITY, FL 32401

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

Hand Arendall Harrison Sale LLC

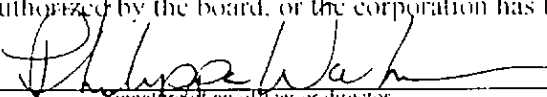
35008 Emerald Coast Parkway

P.O. Box NOT acceptable

Destin, FL 32541

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.

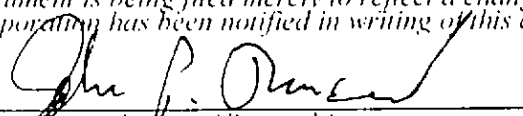
* 
Signature of an officer or director

Philippa Walker

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.


Signature of Registered Agent

06/10/2020

Date

If signing on behalf of an entity:

HAND ARENDALL HARRISON SALE LLC
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