740757

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COVER LETTER

TO:	Amendment Section Division of Corporations				
SURI	Seascape, Phase Three, Association	n, Inc.			
5010	Name of Co	rporation			
DOC	740757 UMENT NUMBER:				
The e	nclosed Statement of Change of Registered Office	Agent and fee are submitted for filing.			
Please	e return all correspondence concerning this matter	to the following:			
	Andrew A. Wood				
	Name of Contact Person				
	Wood & Associates, P.A.				
	Firm/Company				
	980 Airport Road, Suite A				
	Addre	ess			
	Destin, FL 32541				
	City/State and Zip Code				
	drew@woodlawfl.com				
	E-mail address: (to be used for fu	ture annual report notification)			
For fu	arther information concerning this matter, please ca	ail:			
Andr	rew A. Wood	850 424-7467			
	Name of Contact Person	at () Area Code & Daytime Telephone Number			
Enclo	sed is a \$35.00 check made payable to the Departr	nent of State.			
	Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations			
	P.O. Box 6327	Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle			

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of c	the provisions of sections 607.0302, 617.0502, 607.1308, or 617.1508, Florida State change is submitted for a corporation organized under the laws of the State of $\frac{-10}{2}$ order to change its registered affice or registered agent, or both, in the State of Flori	<u>rida</u>
	of the corporation; Seascape, Phase Three, Association, Inc.	NAME OF THE OWNER OWNER OF THE OWNER OWNER OF THE OWNER OWNE
	ipal office address: 910 Airport Road, Suite A-5, Destin, FL 32541	
3. The mailing	ng address (if different):	
4. Date of ince	corporation/qualification: 11/14/1977 Document number: 74075	
5. The name a	and street address of the current registered agent and registered office on file with the spartment of State: (If resigned, enter resigned)	be
	Wave iy Johnson	
	910 Amport Road, Suite A-5	TACE TO
	Destiri, FL 32541	15 MAR 24 TALLAHASS
6. The name a (if changed)	and street sidress of the new registered agent (if changed) and for registered office d):	PH PH
	Andrew A. Wood, Esq.	3: 1) STATE FLORID
	980 Amport Road, Suite A	DE A
	P.O. Box NOT asseptible Destir: FL 32541	
The street add as changed wi	ddress of its registered office and the street address of the business office of its registle be identical.	pistered agent,
	was authorized by resolution duly adopted by its board of directors or by an office beard, or the corporation has been notified in writing of the change. John Bruno, President	er so
	beaut 6 by the or gloots.	
l heréby accep I further agrée performance c agent. Or, if t hereby confirm	ept the appointment as registered agent and agree to act in this capacity, the to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as to this document is being filed merely to reflect a change in the registered office as a matter that the corporation has been notified in writing of this change.	t registered dress, I
		/
	Signature of Replacered Agent	
lf signing on b	i behalf of an entity:	
	Typed or Priscod Nasce	
	* * * FILING FEE: \$35.00 * * *	

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSES, FL 02314 CR28045 (03/12)