

744239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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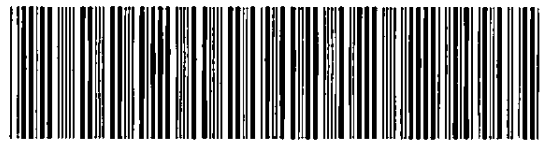
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 SEP 12 PM 12:38

SEATTLE STATE
FALLS, WA



**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: Fairwinds Cove Condominium Association of Hutchinson Island, Inc.
2. The principal office address: 3442 NE Causeway Boulevard
Jensen Beach FL 34957
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 9/12/1978 Document number: 744239
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)

Barbara Shea

1111 SE Federal Hwy Suite 100

Stuart, FL 34994

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

Barbara A. Kreitz Cook, Esq.

Barb Cook Law PLLC

P.O. Box NOT acceptable

759 SW Federal Hwy Suite 216, Stuart FL 34994

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.

Gary R Peterson
Signature of an officer or director

Gary Peterson, 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.

Barbara A Kreitz Cook Esq.
Signature of Registered Agent

8/5/2024

Date

If signing on behalf of an entity:

Barb Cook Law PLLC
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)