

745738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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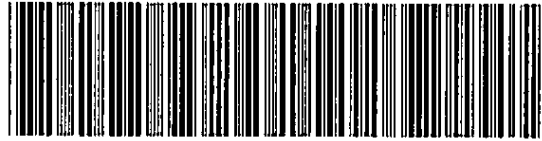
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

2021 SEP - 7 AM 8:30

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EX - 8 137



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2021 SEP -7 PM 3:38

August 27, 2021

PENELOPE HOLLADER
120 PORTSIDE AVE #203
CAPE CANAVERAL, FL 32920

SUBJECT: OCEAN PARK NORTH ASSOCIATION, INC.
Ref. Number: 745738

We have received your document for OCEAN PARK NORTH ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the current registered agent on line 5. You can only put the word resigned if that person actually filed a resignation of registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Brumbley
Regulatory Specialist II

Letter Number: 321A00020766

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ocean Park North Association, Inc
Name of Corporation

DOCUMENT NUMBER: 745738

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:

Penelope Holladay
Name of Contact Person
CoastAL Living Community Management, LLC
Firm/Company
120 Portside Ave #203
Address
Cape Canaveral, FL 32920
City/State and Zip Code
Contact @ CoastALivingCAM.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Penelope Holladay at (321) 693-5225
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: Ocean Park North Association, Inc
2. The principal office address: 350 Taylor Ave B24
Cape Canaveral, FL 32920
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/19/1998 Document number: 745738
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)

Resigned
Lorraine Barrella, LAM
350 Taylor Ave B24 Cape Canaveral, FL 32920

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Coastal Living Community Management, LLC
120 Portside Ave #203
Cape Canaveral, FL 32920

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.

Steven Grevera
Signature of an officer or director

STEVEN GREVERA, BOARD 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.

George Helladakis
Signature of Registered Agent

8/13/21
Date

Signing on behalf of an entity:

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)