747218

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
. PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
, /Dc	ocument Number)	
(1)	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



900253556209

11/12/13--01028--012 **35.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

NOV 18 2013

H. WHITE

COVER LETTER

Division of Corporations
SUBJECT: halifax Shores homeowners Association Name of Corporation
DOCUMENT NUMBER: 747218
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: $add'G'G'G'$
Sharon Zavzenski (director) Name of Contact Person
Halifax Shores Hungauners Association
405 Novth Halifax Ave, Unit 208
Doytono Beach Florida 3218 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Evelyn Litter at (904) 703 - 4943 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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 Honda	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Holifack Shores Homeowness Hoscietum	<u> </u>
2. The principal office address: 405 Nowh the Fax Ave Unit 306	
Doutona Beach, Florida 32118	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 5-17-1979 Document number: 747 218	
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) Jone Pale 1esigned	
Tom Engle 1001gill	
# 311 405 n halifax ave	
day tono beach, florido 32118	
E The game and street address of the new registered exert (if about 4) and (an excitational office.	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Joanmarie Koczan Sie 5	77
405 n hallfox # 112	
day tono beach, fla 3211 Por =	()
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 Evely when they Treasure 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.	
Short Signature of Registered Agent 1-4-2013 Date	
If signing on behalf of an entity:	
Typed or Printed Name	
ryped of rimited riding	

* * * FILING FEE: \$35.00 * * *