

749208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

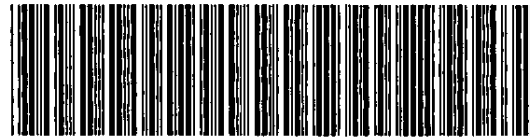
(Business Entity Name)

(Document Number)

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JUL -3 2013

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sea Watch Villa of Flagler
Name of Corporation

DOCUMENT NUMBER: 749208

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:

Faye Crow

Name of Contact Person

Hart Pro Realty

Firm/Company

18 Bovard Ave, Suite A

Address

Ormond Beach, FL 32176

City/State and Zip Code

Faye@hartprorealty.com

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

For further information concerning this matter, please call:

Faye Crow

Name of Contact Person

at (386) 615-0789

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 17, 2013

FAYE CROW
18 BOVARD AVE., STE A
ORMOND BEACH, FL 32176

SUBJECT: SEA WATCH VILLA OF FLAGLER HOMEOWNERS ASSOCIATION,
INC.

Ref. Number: 749208

We have received your document for SEA WATCH VILLA OF FLAGLER HOMEOWNERS 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):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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.

Carol Mustain
Regulatory Specialist II

Letter Number: 613A00015112

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: Sea Watch Villa of Flagler Homeowners Association, Inc.

2. The principal office address: 18 Bovard Ave, Suite A
Ormond Beach, FL 32176

3. The mailing address (if different): _____

4. Date of incorporation/qualification: _____ Document number: 749208

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)

Flagler Palm Coast Property Management, Inc.

50 Leanni Way, Suite B6

Palm Coast, FL 32137

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

Hart Pro Realty.

18 Bovard Ave, Suite A

P.O. Box NOT acceptable

Ormond Beach, FL 32176

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

Jim Wallace, 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

June 5, 2013

Date

If signing on behalf of an entity:

Paul Hart

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 (03/12)

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