## 749705

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Bayberry Horseown Association Phace

DOCUMENT NUMBER: 749 705

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:

Marsha Green Property Manager

Phaerix havage next During She

Firm/Company

4800 N. State Load #7 Duty 105

Address Card Lakes FD. 33319

City/State and Zip Code

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

For further information concerning this matter, please call:

Robert Wilson Pres. at (954) 801-2047

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
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 Florida.  in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Baybarry Honeowie association Ac
2. The principal office address: C/o Phoenix Management Services, Inc. 4800 N. State Road #7, Suitz 10v. Janderdale Jake Fl. 3331.
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/1979 Document number: 749705
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)
Randall K. Roger + Associates PA  621 NW 53 Street One Park Place  Suitz 300 - Boca Loton Ff. 33487  6. The name and street address of the new registered agent (if changed) and /or registered office  (if changed):
Phoenix pranagement bluvices and the street address of the business office of its registered agent.
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.
authorized by the board, or the corporation has been notified in writing of the change.  Signature of an officer or director  Robert U. Ison President  Frinted 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.
Marsh Green LCAM 10/8/13 Signature of Registered Agent Date
If signing on behalf of an entity: Phrenix Management Services the
Marsha Green 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