

750670

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

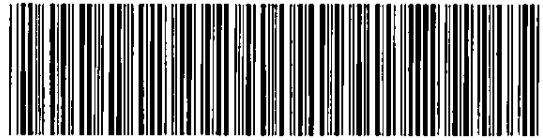
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

*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: 2001 Sailfish Point Boulevard Condominium Association, Inc.

2. The principal office address: 2001 SE Sailfish Point Blvd, Stuart, FL 34996

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 01/18/1980 Document number: 750670

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)

Crary Buchanan Attorneys At Law

759 SW Federal Highway, Suite 106

Stuart, FL 34994

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

Becker & Poliakoff, P.A.

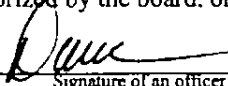
759 SW Federal Highway, Suite 213

P.O. Box NOT acceptable

Stuart, FL 34994

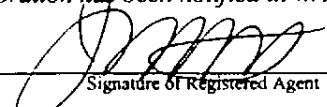
The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

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.


Signature of an officer or director

DAVE FRAZIER JR. / DIRECTOR
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

11/3/2023
Date

If signing on behalf of an entity:

Jane Cornett, Esq.
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)

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