

750995

**RESOURCE**  
PROPERTY MANAGEMENT

7300 Park Street • Seminole, FL 33777  
5901 Sun Blvd., Suite 103 • St. Petersburg, FL 33715  
28100 US Hwy 19 North, Suite 205 • Clearwater, FL 33761  
2025 Lakewood Ranch Blvd., Suite 203 • Bradenton, FL 34211

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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PA Chung

9-17-13

DC

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED  
AGENT

OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 617.0502, 607.0502, 617.1508, or 607.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: PELICAN PLACE CONDOMINIUM ASSOCIATION, INC.
2. The mailing address of the corporation is: 7300 Park Street  
Seminole, FL 33777
3. Date of incorporation/qualification: 6/14/89 Document No.: \_\_\_\_\_
4. The name and address of the current registered agent and office:  
Holiday Isles Property Management, Inc  
11550 W 6th St Suite 124  
Largo FL 33773
5. The name and address of the new registered agent and office (P.O. Box not acceptable)  
Wesley Melton III, Esq. Bush Ross, PA  
1801 N Highland Ave  
Tampa FL 33602-2658

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.

X Bonnie Timmons Pres 8-15-13  
Signature of officer or chairman of the board Date  
BONNIE TIMMONS, PRES  
Printed or typed name and title

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. If 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.

Wesley Melton III, Esq.  
Signature of registered agent

8-28-13  
Date

If signing on behalf of an entity:

Wesley Melton III, Esq.  
Typed or printed name

Attorney  
Capacity

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

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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