

751475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000331383550

07/17/18 0100 -000 1905.10

JUL 20 2019

S. YOUNG

FILED

19 JUL 11 AM 7:18

SEC. 10416-0101  
FEDERAL BUREAU OF INVESTIGATION

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: OCEAN LANDINGS CONDOMINIUM ASSOCIATION, INC.
2. The principal office address: 900 N ATLANTIC AVENUE  
COCOA BEACH FL 32931
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03/10/1980 Document number: 751475
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)

HARRY GREENFIELD  
1980 N ATLANTIC AVE STE 615  
COCOA BEACH FL 32931

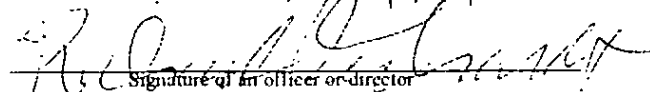
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

SETH D. CHIPMAN, P.A.  
96 WILLARD ST., STE 204  
COCOA FL 32922

P.O. Box NOT acceptable

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.

 Richard G. Gerhardt  
Signature of an officer or 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

7/1/2019  
Date

If signing on behalf of an entity:

Seth D. Chipman  
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