

752465

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

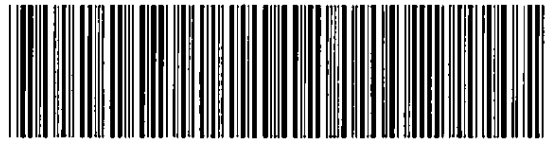
(Business Entity Name)

(Document Number)

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2023 NOV -3 AM 11:00
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Regency of St. Petersburg, Inc.
Name of Corporation

DOCUMENT NUMBER: 752465

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:

Nichole Morales
Name of Contact Person

MacBauer Realty and Property Management
Firm/Company

5420 Central Avenue
Address

St. Petersburg, FL 33707
City/State and Zip Code

Association@macbauerrealty.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nichole Morales at (727) 537-6430
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2023

NICOLE MORALES
MAC BAUER REALTY & PROPERTY MANAGEMENT
5420 CENTRAL AVE
ST PETERSBURG, FL 33707

SUBJECT: THE REGENCY OF ST. PETERSBURG, INC.
Ref. Number: 752465

We have received your document for THE REGENCY OF ST. PETERSBURG, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED LIABILITY COMPANY, but your entity is a PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 723A00021916

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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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Regency of St. Petersburg, Inc.
2. The principal office address: 5420 Central Avenue, St. Petersburg,
FL, 33707
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/13/1980 Document number: 752465
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)

Sentry Management Inc.
2180 West SR 434, Ste. 5000
Longwood, FL 32779

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

Mac Bower Realty and Property Management
5420 Central Avenue
P.O. Box NOT acceptable
St. Petersburg, FL 33707

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

Douglas J Walchli
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

10/17/23
Date

If signing on behalf of an entity:

Nichole Morales
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)

FILED
2023 NOV -3 AM 11:00
TALLAHASSEE, FLORIDA