755921

(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:
ay supher can AR 11/1/19
by sulphin Can
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Office Use Only



100187224461

11/01/10--01003--017 **35.00

RA Rochy



** Roberts NOV 0 2 2019

COVER LETTER

TO:	Amendment Section Division of Corporations		
SUBJ	Sandestin Owners Association Inc. Name of Corporation		
DOC	MENT NUMBER:		
The e	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please	return all correspondence concerning this matter to the following:		
	Jami Wiliams		
	Name of Contact Person		
	Sandestin Owners Association		
	Firm/Company		
	· ········		
	185 Grand Boulevard		
	Address		
	Sandestin, FL 32550		
	City/State and Zip Code		
jwilliams@soaowners.com			
	E-mail address: (to be used for future annual report notification)		
For fu	ther information concerning this matter, please call:		
	Jami Williams at (850)		
	Jami Williams at (850) 424-5960 Name of Contact Person Area Code & Daytime Telephone Number		
Enclos	ed is a \$35.00 check made payable to the Department of State.		
	Mailing Address: Amendment Section Street Address: Amendment Section		
	Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building		
	r.o. box 0327 Cition bunding		

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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: Sandestin Owners Association Inc.	
2. The principal office address: 185 Grand Boulevard, Sandestin, FL 32550	
3. The mailing address (if different): same	
4. Date of incorporation/qualification: <u>January 1981</u> Document number: 7 5592	<u> </u>
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)	
Michelle Anchors	\
909 Mar Walt Dr. Ste 1027 1 = =	
F+ Walton Beach FL 32547	77
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	•
Sandra Matteson-Pierson	
185 Grand Boulevard, Sandestin, FL 32550	
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.	
Sandra Matteson-Pierson Signature of an officer of director	
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 locument 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 10/26/2010 Date	
f signing on behalf of an entity:	
Sandra Matteson-Pierson Typed or Printed Name	
Lyned of Printed Name	

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