

To:

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2024-07-03 15:08:55 CST

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From: David Thomas

7/3/24, 5:06 PM

**756261**  
Division of Corporations  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
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Account Name : C T CORPORATION SYSTEM  
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Phone : (614)280-3338  
Fax Number : (614)573-3996

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Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
DELRAY CLUB, INC.**

Certificate of Status	0
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Page Count	02
Estimated Charge	\$43.75

5. PLINT

C-7/05/24

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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: Delray Club, Inc
2. The principal office address: 2001 S Ocean Blvd.  
Delray Beach, Florida 33483
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 2/6/1981 Document number: 756261
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)

SHANE PEACHEY

2001 SOUTH OCEAN BOULEVARD

DELRAY BEACH, FL 33483

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

C T Corporation System

1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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TALLAHASSEE, FL  
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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.

C. W. Rea  
Signature of an officer or director

Clyde W. Rea

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.

C T Corporation System

7/2/2024

By:

[Signature]  
Signature of Registered Agent

Date

If signing on behalf of an entity:

Eric Jensen-Asst. Secretary

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)