## 757798

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(Address)			
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(City/State/Zip/Phone #)			
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(Business Entity Name)			
(Dasiness Emily Patric)			
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RA. Mg. C.COULLIETTE

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**EXAMINER** 

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** SUBJECT: Sea Oats on the Beach Condominium Association Inc. Name of Corporation 757798 DOCUMENT NUMBER:\_ 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: **Jeff Cresse** Name of Contact Person Southern Association Management Firm/Company 4608 Opa Locka Lane; Suite 300 Address Destin, FL 32541 City/State and Zip Code jeff@gosouthern.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jeff Cresse at (<u>850</u>) <u>269-9936</u> Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: **Street Address:** Amendment Section Amendment Section

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## $\boldsymbol{\rightarrow}$ STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	inge is submitted for a corporation organized under the laws of the State of $\frac{F}{F}$ er to change its registered office or registered agent, or both, in the State of Flo	
	the corporation: Sea Oats on the Beach Condominium Ass	ociation, Inc.
2. The principal	office address: 4608 Opa Locka Lane; Suite 300	
Destin, FL	32541	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: March 1981 Document number:	757798
	d street address of the current registered agent and registered office on file with timent of State: (If resigned, enter resigned)	the
	Southern Association Management	
	4608 Opa Locka Lane; Suite 300	
	Destin, FL 32541	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered offic	N SECRE
	Dunlap & Shipman, P.A	974
	60 Clayton Lane, Suite A	
	P.O. Box NOT acceptable	<b>9</b>
	Santa Rosa Beach, FL 32459	0 AA
_	ess of its registered office and the street address of the business office of its be identical.	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an one board, or the corporation has been notified in writing of the change.	officer so
	re of an officer or director  KEITH VISUER  Printed or typed name and title	5/1
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp d I am familiar with and accept the obligation of my position as registered ng filed merely to reflect a change in the registered office address, I hereby been notified in writing of this change.	plete performance agent. Or, if this confirm that the
	10.7.11	
	half of an entity:	
T	yped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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