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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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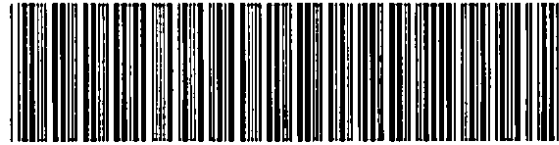
(Business Entity Name)

(Document Number)

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2022 AUG 26 PM 2:47
CLERK OF SUPERIOR COURT
JANUARY 1, 2022

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ocean Trail Villas Owners Assn.
Name of Corporation

DOCUMENT NUMBER: 761015

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:

Josef Andre Schmid
Name of Contact Person

Firm/Company
841 OAK FOREST DRIVE
Address

THE VILLAGES, FL, 32162
City/State and Zip Code

E-mail address: (to be used for future annual report notification) pagomon59@comcast.net

For further information concerning this matter, please call:

Josef Andre Schmid at (443) 255 2065
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

• 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 TRAIL VILLAS OWNERS ASSN., INC.
2. The principal office address: 8202 CANAVERAL BLVD
CAPE CANAVERAL, FLORIDA, 32920
3. The mailing address (if different): 841 OAK FOREST DRIVE THE VILLAGES FL 32162
4. Date of incorporation/qualification: 12/10/1981 Document number: 761015
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)

RICHARD YORK c/o GEORGE BOWMAN
1605 YATES DRIVE
MERRITT ISLAND FL 32952

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

JOSEF ANDRE SCHMID
841 OAK FOREST DR
P.O. Box NOT acceptable
THE VILLAGES FL 32162

SECRETARY OF STATE
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.

Josef A. Schmid
Signature of an officer or director

Josef A. Schmid / PRESIDENT
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.

Josef A. Schmid
Signature of Registered Agent

August 23, 2022
Date

If signing on behalf of an entity:

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