

# 762024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

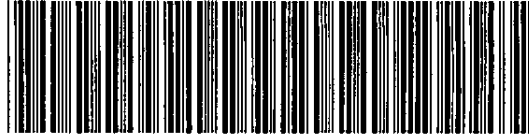
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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change*

08/17/15--01021--007 \*\*35.00

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

2015 AUG 17 PM 1:10

FILED

AUG 18 2015  
A RAMSEY

**BECKER &  
POLIAKOFF**

**Shannon J. Towles  
Paralegal**

**Phone: (904) 423-5372  
stowles@bplegal.com**

**100 Whetstone Place, Suite 302  
St. Augustine, Florida 32086**

August 12, 2015

**VIA FIRST CLASS MAIL**

Florida Department of State  
Amendment Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**Re: Ocean Terrace Club Management Association, Inc.  
Change of Registered Agent Office Address  
Client/Matter No. 001851-082788**

Dear Sir or Madam:

Enclosed is a cover letter, Statement of Change of Registered Office or Registered Agent or both for Corporations, and this firm's check number 20385 in the amount of \$35.00 made payable to Florida Department of State which we have prepared on behalf of Ocean Terrace Club Management Association, Inc. in order to change our office address as their registered agent.

Please update our address in your records, as per the enclosed documentation.

Thank you for your help in this regard. Should you have any questions, please let me know.

Sincerely,



Shannon J. Towles

Enclosures

cc: Ocean Terrace Club Management Association, Inc.

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Ocean Terrace Club Management Association, Inc.

Name of Corporation

DOCUMENT NUMBER: 762024

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:

Keith E. Broll, Esq.

Name of Contact Person

Becker & Poliakoff, P.A.

Firm/Company

100 Whetstone Place, Suite 302

Address

St. Augustine, FL 32086

City/State and Zip Code

kbroll@bplegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shannon Towles

Name of Contact Person

at ( 904 ) 423-5372

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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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 Terrace Club Management Association, Inc.

2. The principal office address: 3800 S. Atlantic Avenue, Suite 108, Daytona Beach Shores, FL 32118

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 02/18/1982 Document number: 762024

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)

Keith Broll, Esquire - Becker & Poliakoff, P.A.

2500 Maitland Center Parkway, Suite 209

Maitland, FL 32751

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

Becker & Poliakoff, P.A.

100 Whetstone Place, Suite 302

P.O. Box NOT acceptable

St. Augustine, FL 32086

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.

*Raymond C. Lambert*  
Signature of an officer or director

RAYMOND CLAMBERT - TREASURER  
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.*

*Shannon Apple* on behalf of \_\_\_\_\_  
Signature of Registered Agent

8-12-15  
Date

If signing on behalf of an entity:

Becker & Poliakoff, P.A.  
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 (03/12)

FILED  
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TALLAHASSEE, FLORIDA  
DEPT. OF STATE