

762024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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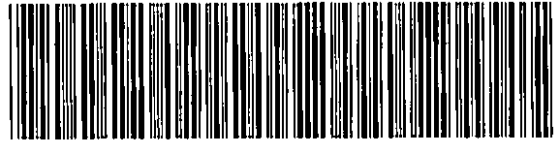
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

R. WHITE

DEC 03 2018

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:

Christine Pierce

Name of Contact Person

OCEAN TERRACE CLUB

Firm/Company

3800- S. ATLANTIC AVE #108

Address

DAYTONA BEACH SHORES, FL. 32118

City/State and Zip Code

OTCMGR@YAHOO.COM

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

For further information concerning this matter, please call:

Christine Pierce

Name of Contact Person

at (386) 767-3312

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 AVE. #108
DAYTONA BEACH SHORES, FL. 32118
3. The mailing address (if different): _____
4. Date of incorporation/qualification: MAY 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)

Christopher W. Wickersham Jr Esq
the white way building suite 205
2720 Park Street, Jacksonville, FL 32205

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

Wright & Casey
340 North Causeway
P.O. Box NOT acceptable
New Smyrna Beach, FL 32169

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.

[Signature]
Signature of an officer or director

RICHARD RIZZIEWICZ / 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.

[Signature]
Signature of Registered Agent

11/20/2018
Date

If signing on behalf of an entity:

Barbara C. Reid o/b/o Wright & Casey, 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)