

762317

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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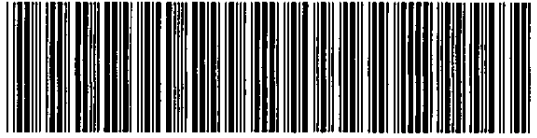
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Captains' Quarters of St. Augustine Beach CondoAssc
Name of Corporation

DOCUMENT NUMBER: 762317

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:

June E Supko, LCAM, MPA

Name of Contact Person

Captains' Quarters Condominium Association

Firm/Company

1 Dondanville Road

Address

St. Augustine, Florida 32080

City/State and Zip Code

captainquarters@bellsouth.net

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

For further information concerning this matter, please call:

June E Supko, LCAM, MPA

Name of Contact Person

at (904) 471-0712
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: Captains' Quarters of St. Augustine Beach CondoAssoc., Inc.
2. The principal office address: 1 Dondanville Road, St. Augustine, Florida 32080

3. The mailing address (if different): same

4. Date of incorporation/qualification: March 8, 1982 Document number: 762317

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)

Monte Pedone (Resigned)

1 Dondanville Road

St. Augustine, Florida 32080

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

June E Supko, LCAM, MPA

1 Dondanville Road

P.O. Box NOT acceptable

St. Augustine, Florida 32080

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.

Michael Testoni, Treasurer
Signature of an officer or director

Michael Testoni, 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.

June E. Supko
Signature of Registered Agent

September 23, 2009
Date

If signing on behalf of an entity:

June E Supko, LCAM, MPA
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

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