## 763850

(Requestor's Name)			
Camachee Island Owners Association, Inc. c/o The Print Shop 71 S. Dixie Highway #6 St. Augustine, FL 32084			
(City/State/Zip/Phone #)			
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MELAHASSEE, FLORRE

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

• •	•	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida
		egistered agent, or both, in the State of Florida.
1. The name of t	the corporation: Camachee Isla	and 1 Condominium Association, Inc.
• •	office address: 71 S. Dixie Hig stine, FL 32084	hway, #6
	uddress (if different): P. O. Box 7	762
4. Date of incorp	poration/qualification:	Document number: 763850
5. The name and		ered agent and registered office on file with the
	Phil Cole - resigned	
		d agent (if changed) and /or registered office
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
	Maria M. Burk	ALE OL
	71 S. Dixie Highway #6	ŕ
		NOT acceptable
	St. Augustine, FL 32084	
		treet address of the business office of its registered agent,
Such change wa authorized by th	as authorized by resolution duly ad- ne board, or the corporation has bee	opted by its board of directors or by an officer so en notified in writing of the change.
Signatur	re of an officer or director	Mary Jane Dillon Resident Printed or typed name and title
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered age to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notij	nt and agree to act in this capacity. I statutes relative to the proper and complete and accept the obligation of my position as registered o reflect a change in the registered office address, I fied in writing of this change.
	ia In. Durk	7/9/13
	nature of Registered Agent half of an entity:	Date (
т.	yped or Printed Name	
13	ypor or runned reams	

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