764737

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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JAN 2 2 2013 T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations Starbeach Condominium Association, Inc. Name of Corporation 764737 DOCUMENT NUMBER: 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: David Hoffman Name of Contact Person Omega Community Management, Inc. Firm/Company 3270 Suntree Boulevard, Suite 216 Melbourne, Florida 32940 City/State and Zip Code dhoffman@omegacommunitymanagement.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: David Hoffman Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Mailing Address: Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tailahassee, FL 32301

CR2E045 (03/12)

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: Starbeach Condominium Association, Inc. | |
| 2. The principal office address: 3270 Suntree Boulevard, Suite 216 | |
| Melbourne, Florida 32940 | |
| 3. The mailing address (if different): | |
| 4. Date of incorporation/qualification: 8-27-1982 Document number: 764737 | |
| 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) | 1 |
| HART, JAMES W JR C/O SENTRY MANAGEMENT, INC. | NV: |
| 2180 WEST SR 434 SUITE 5000 | NON C |
| LONGWOOD, FL 32779 |)F CO |
| 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | DIVISION OF CORPORATIONS |
| OMEGA COMMUNITY MANAGEMENT, INC. | 1101 |
| 3270 SUNTREE BOULEVARD, SUITE 216 | ر. |
| P.O. Box NOT acceptable | |
| MELBOURNE, FLORIDA 32940 | |
| The street address of its registered office and the street address of the business office of its registered agen as changed will be identical. | t, |
| 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. | |
| Marion Bellevator Marion Billington / PD Signature of an officer or digetor 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 of Registered Agent 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 CR2E045 (03/12) | |