771080

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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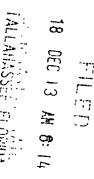
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	Sunset Trace Homeowners Association, Inc.	
	Name of Corporation	
DOCU	UMENT NUMBER: 771080	
	nclosed Statement of Change of Registered Office/Agent and fee are submitted for t	äling.
	return all correspondence concerning this matter to the following:	•
	Lance Clouse, Esq.	
	Name of Contact Person	
	Becker & Poliakoff, P.A.	
	Firm/Company	
	759 SW Federal Highway, Suite 213	
	Address	-
	Stuart, FL 34994	
	City/State and Zip Code	
	manager@st-hoa.com	
	E-mail address: (to be used for future annual report notification)	
_	rther information concerning this matter, please call:	
Cha	Area Code & Daytime Telep	38
	Name of Contact Person Area Code & Daytime Telep	hone Number
Enclos	sed is a \$35.00 check made payable to the Department of State.	
	Mailing Address: Amendment Section Street Address: Amendment Section	
	Division of Corporations Division of Corporatio	ns

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida in the state of Florida.
 The name of The principal 	office address: SUNSET TRACE HOMEOWNERS ASSOCIATION, INC.
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: 11/03/1983 Document number: 771080
	I street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
·	BONAN, ELIZABETH P. ESQ. C/O ROSS EARLE & BONAN, PA
	789 SW FEDERAL HIGHWAY - STE. 101
	STUART, FL 34994
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	BECKER & POLIAKOFF, P.A.
	Royal Palm Financial Center ☐ ☐ ☐
	759 SW Federal Highway, Suite 213, Stuart, Florida 34994
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
	as authorized by resolution duly adopted by its board of directors or by an officer so
Loca	Charle Robert HAZEL PRESIDENT Printed or typed name and title
I further agrée performance of agent. Or, if th	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
	nature of Registered Agent 12/10/18 Date
If signing on be	half of an entity:
Lance D. C	Clouse, Esq
Ť	yped orinted Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

* * * F LING FEE: \$35.00 * * *