L05000098630

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

•	COVER LETTER ,		
TO: Registration Section Division of Corporations			
SUBJECT: Front Beach Condomic (Nan	inium Developers, L.L.C. ne of Limited Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Regist	ered Office Change and fee(s) are submitted for filing.		
Please return all correspondence conce	erning this matter to the following:		
Gary B. Leuchtman (Name of Person)			
Beggs and Lane			
(Firm/Company)			
501 Commendencia Street			
(Address)	•		
Pensacola, Florida 32502			
(City/State and Zip Code)		
For further information concerning thi	s matter, please call:		
Gary B. Leuchtman	at (850) 432-2451		
(Name of Person)	(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the fo	llowing amount:		
✓ \$25 Filing Fee	\$55 Filing Fee & Certified Copy		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liab	oility company is: Front Be	each Condominium Developers,	L.L.C.	
2. The mailing address of the l	imited liability company i	is:		<i>-</i>
101-A Business Centre Drive, De	estin, Florida 32550			
10/06/2005		L05000098630		
3. Date of filing/registration in	Florida	4. Document number		
5. The name of the registered a Florida Department of State:		fice address as shown on th	e records of t	he
Hen	man L. Neese, Jr.			
101	Name			
101-	-A Business Centre Drive Address		50 S	i .
Dest	tin, Florida 32550	1		- CTT
City, State and Zip		d Zip	生命 诗	
6. The name and address of the	new registered agent and	/or office:	IAU LOT	•
Gary	/ B. Leuchtman		FS C	
501 (Name Commendencia Street		STATE FLURAGE	٠ پ د
Flo	rida street address (P.O. E	Box NOT acceptable)		**
Pens	sacola FL 3	32502		
	City, State and	Zip		
If the limited liability company confirmed that after the change and the business office of the re liability company, it is hereby of the members of the limited or the operating agreement of t	or changes are made, the egistered agent will be ide confirmed that the change liability company or as of	Florida street address of the entical. Or, in the case of a (s) was/were authorized by herwise provided in the arti	ne registered o Florida limite an affirmativ	office ed /e vote
(Signature of a member or authorized rep				
(Printed or typed name of signee)		 . • • .		
I hereby accept the appointme comply Mith the provisions of a and I am familiar with an light Chapten 508, FS. by it his de address I hereby confirm that	nt as registered agent and all statutes relative to the public to the post of the post of the post of the limited liability company.	d agree to act in this capact proper and complete perfor position as registered agen merely reflect a change in t any has been notified in wr	ity. I further c rmance of my it as provided he registered iting of this ch	agrec to duties, for in office hange.
(Signature of Registered Agent)	Commentary DO Do	6227 Wallahaasaa EY 22	21.4	
/ Division of (Corporations, P.O. Box	6327, Tallahassee, FL 32.	J14	

FILING FEE: \$25.00