## N0000006803

	•	
(Reque	estor's Name)	
(Addre	ss)	
(Addre	ss)	
<b>(</b>	,	
(0)-10		
(City/S	tate/Zip/Phone	÷ #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Nam	ne)
•	,	•
(Dogur	nent Number)	
(10000)	nent Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filir	ng Officer:	
•		1
		Į
l		

Office Use Only



500097248295

04/18/07--01024--023 \*\*35.00

FII.ED

07 APR 18 PH 2: 22

TALLAHASSEE, FLORIDA

CB RALL

## DUNLAP, TOOLE, SHIPMAN & WHITNEY, P.A. LAWYERS

Davisson F. Dunlap, Jr. Dana G. Toole Gary A. Shipman William E. Whitney 2065 THOMASVILLE ROAD, SUITE 102 TALLAHASSEE, FLORIDA 32308 PHONE: 850-385-5000 FACSIMILE: 850-385-7636

DAVISSON F. DUNLAP, III DAVID H. MILAM JAMES R. CAVES, III KRISTIN A. GARDNER DAVISSON F. DUNLAP, OF COUNSEL

1414 COUNTY HIGHWAY 283 SOUTH, SUITE B SANTA ROSA BEACH, FLORIDA 32459 PHONE: 850-231-3315

FACSIMILE: 850-231-5816

REPLY TO: SANTA ROSA BEACH OFFICE

April 16, 2007

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Cessna Landing Community Association, Inc.
Amendment – Registered Agent

Please find attached the Statement of Change of Registered Agent for the above referenced matter, along with a check in the amount of \$35.00 for filing of same. Please do the necessary.

Thanking you in advance, I am

Sincerely,

Charlotte Floyd

Paralegal to Gary A. Shipman

/cf

Attachments (2)

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Cessna Landing Community Asso (Name of Con	ciation, Inc.	
DOCUMENT NUMBER: N00000006803		
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter t	o the following:	
Gary A. Shipman, Esquire (Name of Cont	act Person)	
Dunlap, Toole, Shipman & Whitney, P.A.  (Firm/Company)		
5399 E. Cty. Hwy. C30-A, Unit 8 (Address)		
Santa Rosa Beach, Florida 32459 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Gary A. Shipman, Esquire (Name of Contact Person)	at ( 850 ) 231-3315 (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

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 ir to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Cessna Landing Community Association, Inc.
	office address: 5311 E. County Hwy. 30-A, Suite 5, Santa Rosa Beach, Florida 32459
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 10/12/2000 Document number: N00000006803
	d street address of the current registered agent and registered office on file with the trument of State:
	Walter R. Pritchett
	5311 E. County Hwy. 30-A
	Santa Rosa Beach, Florida 32459
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	Gary A. Shipman, Esquire
	5399 E. Cty. Hwy. C30-A, Unit 8  (P.O. Box NOT acceptable)
	Santa Rosa Beach, Florida 32459
The street addreas changed will	ess of its registered office and the street address of the business office of its registered agent, lbe identical.
John W	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.  LOHN W, THOMPSON JR, President (Printed or typed name and title)
	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 performance ad I and familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a charge in the registered office address, I hereby confirm that the s been notified in writing of the change
Jay	4/13/07
If signing on be	enalf of an entity:  Typed or Printed Name)
,	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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