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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: Mandalay Beach Club Ouncis Association Inc. Name of Corporation			
DOCUMENT NUMBER: NOI 0000022416			
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:			
Name of Contact Person			
Mandalan Beach Club Firm/Company			
10 Ragaya Street Address			
Clear water 7 33767 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Contact Person at (787) 442-8819  Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			
Amendment Section Amendment Section  Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## 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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Mondaley Beach also Owners Association Inc
2. The principal office address: 10 Rapaya Street,
Clearwater, 7, 33767
3. The mailing address (if different):
4. Date of incorporation/qualification: 3/30/2001 Document number: NO1000003246
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)
RESIGNED - Dickey Las From P.A.
630 E. Twiggs St, Ste 305P" &
Florida Department of State: (If resigned, enter resigned)  RESIGNED - bickey Last From P.A.  630 E. Twi ags 5t, Ste 305P  Tampa to 33602  6. The name and street address of the new registered agent (if changed) and /or registered office- (if changed):
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Robin Parker P.A.  28059 US Highway 19 North, Swife 301  P.O. Box NOT acceptable
28059 US Highway 19 North, Shite 301
P.O. Box NOT acceptable
Clearwater, 71 33761
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
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.
Danie Te jijdo 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
If signing on behalf of an entity:
Mandal and Beach Club Owner's Assoc. Sinc.

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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