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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PLANTATION POINT HOMEOWNERS ASSOCIATION OF BREVARD, FL
(Name of corporation)

DOCUMENT NUMBER: NO1000003758

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:

MARK JACKSON
(Name of contact person)

SPACE COAST PROPERTY MANAGEMENT
(Firm/Company)

1617 COOLING AVE.
(Address)

MELBOURNE, FL 32935
(City/state and zip code)

For further information concerning this matter, please call:

MARK JACKSON at (321) 757-9609
(Name of contact person) (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
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 25, 2005

Mark Jackson
% SPACE COAST PROPERTY MANAGEMENT
1617 Cooling Avenue
Melbourne, FL 32935

SUBJECT: PLANTATION POINT HOMEOWNERS ASSOCIATION OF
BREVARD, INC.
Ref. Number: N01000003758

We have received your document for PLANTATION POINT HOMEOWNERS ASSOCIATION OF BREVARD, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The registered agent designated in your document is not an active fictitious name registration according to our records. Such registration is required before your document can be processed. We have enclosed an application for your convenience.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6910.

Louise Flemming-Jackson
Document Specialist Supervisor

Letter Number: 105A00037602

**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: PLANTATION PUENT HOMEOWNERS ASSOCIATION OF BREVARD, E.
2. The principal office address: P.O. Box 561193, ROCKLEDGE, FL, 32956-119.

3. The mailing address (if different): 1617 COOLING AVE
MELBOURNE FL 32935

4. Date of incorporation/qualification: 23 MAY 2001 Document number: N 01040000 3758

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

HUGH M. EVANS JR.
1682 W HIBISCUS BOULEVARD
MELBOURNE, FL, 32901

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

SEACREST COAST PROPERTY MANAGEMENT OF BREVARD, INC.
1617 COOLING AVE.
(P.O. Box NOT acceptable)
MELBOURNE, FL, 32935

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.

Daniel P. Russell II - President
(Signature of an officer or director)

DANIEL P. RUSSELL II / President
(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]
(Signature of Registered Agent)

4/20/05
(Date)

If signing on behalf of an entity:

Kevin G. Marks
(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