

ND 00000 4633

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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S TALLENT
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18 SEP 26 AM 7:58
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 12, 2018

PATTI TALLEY
CAMELLIA PROPERTIES
PO BOX 15149
BRADENTON, FL 34280

SUBJECT: GULF BREEZE CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N01000004633

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

THE PRINCIPAL OFFICE ADDRESS CANNOT BE A PO BOX NUMBER; IT MUST BE A PHYSICAL ADDRESS.

The capacity of the officer/director signing should be indicated. Ex. President, Vice President, Chairman of the Board, etc.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 418A00018978

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19 SEP 26 AM 10:53
CLARY C
TASSEL

*Sorry -
Please see attached →
Patti Talley*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gulf Breeze Condominium Association
Name of Corporation

DOCUMENT NUMBER: NO1000004633

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:

Patti Talley
Name of Contact Person

Camellia Properties
Firm/Company

PO Box 15149
Address

Bradenton, FL 34280
City/State and Zip Code

pattitalley@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patti Talley at (941) 778-8000
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: Gulf Breeze Condominium Association, INC
2. The principal office address: PO Box 15149 1800 Gulf Dr. N.
Bradenton FL 34280 Bradenton Beach,
3. The mailing address (if different): FL 34217
4. Date of incorporation/qualification: 7/02/2001 Document number: NO1000004633
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)

Jeff Richardson - PMI Holmes Beach Prop.
6400 Manatee Ave N. #F
Bradenton FL 34209 *mqm*

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

Camellia Properties - Patti Talley
1800 Gulf Dr. N.
P.O. Box NOT acceptable
Bradenton Beach, FL 34217

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.


Signature of an officer or director

Chuck Shoemaker *P*
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

8-30-18
Date

If signing on behalf of an entity:

Patti L Talley
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

CR2E045 (03/12)

FILED
18 SEP 26 AM 7:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA