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TO:

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Amendment Section Division of Corporations

SUBJECT: Twin Palms Resort Community Association, Inc

Name of Corporation

DOCUMENT NUMBER:

N01000005601

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:

Elizabeth J. Walters, Esq.

Name of Contact Person

Burke Blue Hutchison Walters & Smith, P.A.

Firm/Company

16215 Panama City Beach Parkway

Address

Panama City Beach, FL 32413

City/State and Zip Code

ewalters@burkeblue.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elizabeth J. Walters, Esq.

850 \236-4444

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: The Twin Palms Resort Community Association, Inc.
2. The principal office address: 10519 Front Beach Road, Panama City Beach, FL 3240
3. The mailing address (if different): 10519 Front Beach Road, Panama City Beach, FL 3
4. Date of incorporation/qualification: 08/08/2001 Document number: N0100005601
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)
Southern Association Management
4608 Opa Locka Lane, Suite 300
Destin, FL 32541
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Burke Blue Hutchison Walters & Smith, P.A.
16215 Panama City Beach Parkway
P.O. Box NOT acceptable Panama City Beach, FL 32413
The street address of its registered office and the street address of the business office of its registered agen 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. J. Stephen Dean Signature of an officer or director Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. 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.
Signistive of Kegistered Agent 9/17/14
If signing on behalf of an entity:
Elizabeth J. Walters
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)