14010000000863/

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	,
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	·	

Office Use Only



900242947629

12/28/12--01009--005 **35.00

12 DEC 28 PH 1: 07
SEGNETARY OF STATE
TALLAHASSEE, FLORIS

Mxxx 13

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: OAK GROVE HOMEOWNERS ASSOCIATION OF BREVARD, INC.

Name of Corporation

DOCUMENT NUMBER: NO100008631

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:

DESIREE LINDAHL

Name of Contact Person

SOUNDVIEW PROPERTY MANAGEMENT

Firm/Company

2095 INDIAN RIVER BLVD.

Address

VERO BEACH, FL 32960

City/State and Zip Code

DESIREE@SOUNDVIEWMGT.COM

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

For further information concerning this matter, please call:

DESIREE LINDAHL

Name of Contact Person

at (321) 725-0022

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, 6 mge is submitted for a corporation r to change its registered office on	n organized under the laws	of the State of	FLORIDA	_
	he corporation: OAK GROVE office address: C/O SOUND		•		D, INC
	office address: C/O SOUND (LVD. VERO BEACH, FL.:		IANAGEIVIE	INT 2095 II	ADIAI
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 12/10/2	001Document nur	nber: N0100	0008631	
	street address of the current registment of State: (If resigned, enter		office on file w	ith the	
	VESTA PROPERTY SE	RVICES, INC		•	
	1021 OAK STREET			TALS	
	JACKSONVILLE FL 322	204 US		2 DEC ECRÉT LAHA	
6. The name and (if changed):	street address of the new register	ed agent (if changed) and /c	or registered of	SPN	Anterior Control
	SOUNDVIEW PROPER	TY MANAGEMENT	· · · · · · · · · · · · · · · · · · ·	STA LOR	green i
	2095 INDIAN RIVER BL			O.7	
•	VERO BEACH, FL 3296	30x NOT acceptable			
The street addre as changed will	ss of its registered office and the be identical.	street address of the busine	ess office of its	s registered age	ent,
Such change wa authorized by th	s authorized by resolution duly a e board, or the corporation has b	dopted by its board of direction notified in writing of the	ctors or by an one change.	officer so	
Signatur	e of an officer or director	Kithy	Emme typed name and titl	rich p	DOF
I further agree t performance of	the appointment as registered ag o comply with the provisions of a my duties, and I am familiar with s document is being filed merely that the corporation has been no	all statutes relative to the parties and accept the obligation	roper and com of my position	plete i as registered e address, I	
Ken	Solens	12/	26 12 Date		
_	nature of Registered Agent		Date		
Ту	ped or Printed Name				

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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