N02152

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JUL 18 2012

T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Compass Rose Condominium Owners' Association, Inc.				
Name of Corporation				
DOCUMENT NUMBER: NO2152				
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:				
Jay Roberts, Esq. Name of Contact Person				
Becker & Poliakoff, P.A.				
Firm/Company				
348 S.W. Miracle Strip Parkway, Suite 7				
Address				
Fort Walton Beach, FL 32548				
City/State and Zip Code				
jroberts@becker-poliakoff.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call: Jay Roberts, Esq. Name of Contact Person at (850 664-2229) Area Code & Daytime Telephone Number				
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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, angle is submitted for a corporation organized under the laws of the State of Florida r to change its registered office or registered agent, or both, in the State of Florida.	this	
	the corporation: Compass Rose Condominium Owners' Associatio	n, Inc.	
2. The principal	office address: 955 Scenic Gulf Drive, Unit 410, Destin, FL 32550		<u> </u>
3. The mailing a	address (if different): 315 East Hollywood Boulevard, Suite 1A, Mary Esthe	er, FL 32	569
4. Date of incorp	poration/qualification: 03/22/1984 Document number: N02152		
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)		
	Karen Williams		
	955 Scenic Gulf Drive, Unit 410		
	Destin, FL 32550		12 J
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office		81 JUL
	Becker & Poliakoff, P.A.	71.7	
	348 S.W. Miracle Strip Parkway, Suite 7		1: 05
	Fort Walton Beach, FL 32548	5 (1)	σ.
The street addre	ess of its registered office and the street address of the business office of its register be identical.	ed agent,	
_	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.)	
11	Karen R. Williams re 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. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as regis is document is being filed merely to reflect a change in the registered office addres that the corporation has been notified in writing of this change.	tered s, I	
	haydre of Registered Agent Date	<u>-</u>	
Day	half of an entity: Oberts, Esq. yped or Printed Name		

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

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