

NO3000005025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

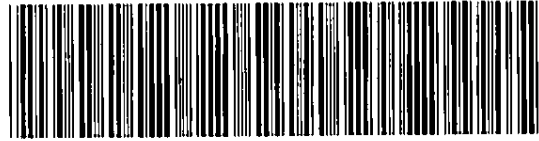
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

2024 SEP 30 PM 2:48

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: WATERS EDGE AT BRIAR BAY ASSOCIATION, INC.  
Name of Corporation

DOCUMENT NUMBER: N03000005023

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:

Nicole-Yorque Kruse, President

Name of Contact Person

Waters Edge at Briar Bay Association, Inc.

Firm/Company

3400 Celebration Boulevard

Address

West Palm Beach, FL 33411

City/State and Zip Code

watersedgeatbriarbaybod@gmail.com

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

For further information concerning this matter, please call:

Nicole-Yorque Krus

Name of Contact Person

at ( 561 ) 246-2647

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: Waters Edge at Briar Bay Association, Inc.
2. The principal office address: 3400 Celebration Boulevard, West Palm Beach, FL 33411
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 06/12/2003 Document number: N03000005023
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)

Nicole-Yorque Kruse

3400 Celebration Boulevard

West Palm Beach, FL 33411

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

Phoenix Management

6131B Lake Worth Road

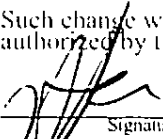
P.O. Box NOT acceptable

Greenacres, FL 33463

**FILED**  
**2024 SEP 30 PM 2:48**  
**SECURE FILING OF STATE**  
**TALLAHASSEE, FL**

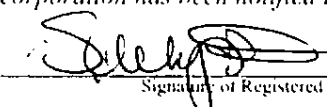
The street address of its registered office and the street address of the business office of its registered agent,  
as changed will be identical.

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

Nicole-Yorque Kruse  
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

10-23-24  
Date

If signing on behalf of an entity:

  
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 (04/13)



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 15, 2024

NICOLE-YORQUE KRUSE  
3400 CELEBRATION BOULEVARD  
WEST PALM BEACH, FL 33411

SUBJECT: WATERS EDGE AT BRIAR BAY ASSOCIATION, INC.  
Ref. Number: N03000005023

We have received your document for WATERS EDGE AT BRIAR BAY ASSOCIATION, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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.

Anissa Butler  
Regulatory Specialist II

Letter Number: 824A00022574