

N04000010377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

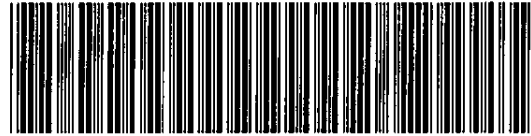
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300212218223

RA
change

10/28/11--01031--019 **140.00

FILED
2011 OCT 28 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AJR
11/2/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tomoka Landings Property Owners' Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N04000010377

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:

Janet Saller
Name of Contact Person

Branch Banking and Trust Company
Firm/Company

1580 Sawgrass Corporate Parkway #310
Address

Sunrise, Florida 33323
City/State and Zip Code

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

For further information concerning this matter, please call:

Andrea Fowler at (407) 488-1220
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: Tomoka Landings Property Owners' Association, Inc.
2. The principal office address: c/o Lisa I. Moberly - BB&T
200 W. Second Street 3rd Floor, Winston-Salem, North Carolina 27101
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/03/2004 Document number: N04000010377
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)

Katz, B. Paul

1 Florida Park Drive South, Atrium Suite

Palm Coast, Florida 32137

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

C T Corporation System

1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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

Janet Saller, Vice President

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.*

X *Connie Bryan*
Signature of Registered Agent

11/1/2011
Date

If signing on behalf of an entity:

Connie Bryan Assistant Secretary
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 (8/05)

FILED
2011 OCT 28 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA