## N04000011774

(Address)	
(Address)	
	• • •
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of S	Status
Special Instructions to Filing Officer:	
•	:

Office Use Only



100183352151

07/19/10--01056--016 \*\*35.00



22/3/0A

## **COVER LETTER**

Amendment Section Division of Corporations

DOCUMENT NUMBER:	N04000011774
The enclosed Statement of Change of	of Registered Office/Agent and fee are submitted for filing
Please return all correspondence cor	ncerning this matter to the following:
	MINETTA GARAY
	Name of Contact Person
PROPI	ERTY SOLUTIONS UNLIMITED, INC.
	Firm/Company
	P. O. BOX 421423
	Address
	KISSIMMEE, FL 34742-1423City/State and Zip Code
	City/State and Zip Code
	NETTA@RENTOWNSELL.COM : (to be used for future annual report notification)

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 Statute statement of change is submitted for a corporation organized under the laws of the State of FLOR in order to change its registered office or registered agent, or both, in the State of Florida.	RIDA
1. The name of the corporation: Sand Dollar Bay Homeowners' Association, In	nc.
2. The principal office address: 22 North Orlando Avenue, Kissimmee, FL 34741	
3. The mailing address (if different): P. O. Box 421423, Kissimmee, FL 34742-1423	<del></del>
4. Date of incorporation/qualification: 12-17-64 Document number: N0400	00011774
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)	;
PROPERTY SOLUTIONS UNLIMITED, INC.	
28 BROADWAY AVENUE, SUITE 208	
KISSIMMEE, FL 34741	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	TO JU
PROPERTY SOLUTIONS UNLIMITED, INC.	
22 NORTH ORLANDO AVENUE	
P.O. Box NOT acceptable	· · · · · · · · · · · · · · · · · · ·
KISSIMMEE, FL 34741	80 <b>8</b> 0
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	istered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change.	er so
TOM M. IRVING, PRESID Printed or typed name and title	DENT
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 of my duties, and I am familiar with and accept the obligation of my position as registered age document is being filed merely to reflect a change in the registered office address, I hereby corporation has been notified in writing of this change.	performance ent. Or, if this nfirm that the
Mirette Local June 22, 2010 Signature of Registered Agent Date	·
If signing on behalf of an entity:	
Property Solutions Unlimited, Inc. Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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