

N04388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

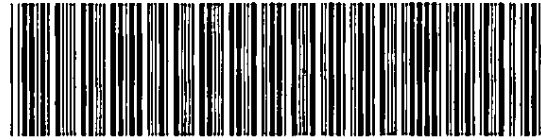
(Business Entity Name)

(Document Number)

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500350025215

08/11/2019 10:10:11 AM

2020 Oct 14 PM 1:05

Amend

OCT 14 2020

1 ALBRITTON

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: SEACREST TWO CONDOMINIUM ASSOCIATION, INC.

DOCUMENT NUMBER: N04388

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

June Walker

OR  
(Name of Contact Person)

MAURICE W. JART

Island Real Estate

(Firm/ Company)

6101 Marina Drive

(Address)

3703 5TH AVE, UNIT 4

Holmes Beach, FL, 34217

(City/ State and Zip Code)

HOLMES BEACH, FL, 34217

JuneW@islandreal.com

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

WJART.MD@gmail.com

For further information concerning this matter, please call:

518-935-7411

June Walker

at

(Name of Contact Person)

941

345-1295

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is  
enclosed)

PREVIOUSLY  
SUBMITTED

**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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 1, 2020

JUNE WALKER  
ISLAND REAL ESTATE  
6101 MARINA DRIVE  
HOLMES BEACH, FL 34217

SUBJECT: SEACREST TWO CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: N04388

We have received your document for SEACREST TWO CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

You failed to sign the form.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Irene Albritton  
Regulatory Specialist II

Letter Number: 020A00018984

*Rec'd correction  
in 11/11/20  
(10)*

Articles of Amendment  
to  
Articles of Incorporation  
of

Seacrest Two Condominium ~~Assoc~~ Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N04388

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

n/a The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6101 Marina Drive

Holmes Beach

FL, 34217

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6101 Marina Drive

Holmes Beach

FL, 34217

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

June Walker

6101 Marina Drive,

(Florida street address)

New Registered Office Address:

Holmes Beach

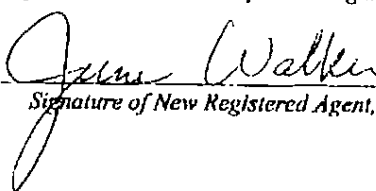
(City)

Florida 34217

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

  
Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>P</u>	<u>Maurice Wiert</u>	<u>41 Fox Hollow Lane</u> <u>Queensbury, NY 12804</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>P</u>	<u>Tom Evenhouse</u>	<u>175 Oklahoma Ave.</u> <u>New Braunfels, TX 78130</u>
3) <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Anthony Nichol</u>	<u>3345 Blue Heron Trace</u> <u>Medina, OH 44256</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>S</u>	<u>Judith Noyes</u>	<u>4230 State Route 46</u> <u>Munnsville, NY 13409</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>D</u>	<u>Judi Linn</u>	<u>#4 28th St.</u> <u>Huntington, WV 25702</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input checked="" type="checkbox"/> Remove	<u>Manager</u>	<u>M. J. Northfield</u>	<u>3101 Gulf Dr.</u> <u>Holmes Beach, FL 34217</u>

F. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

n/a

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated Oct. 12/2020

Signature Maurice  
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

MAURICE WART  
(Typed or printed name of person signing)

HOA PRESIDENT  
(Title of person signing)