

N05000000183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

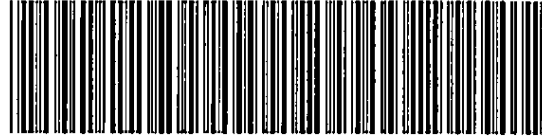
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19 AUG 13 AM 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 14 2019  
S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 31, 2019

SANDY ELLIS COMM ASSN MGR LCAM, CMCA, AMS  
RVA RESORT VACATIONS  
4030 GULF OF MEXOCO DRIVE  
LONGBOARD KEY, FL 34228

SUBJECT: SILVER SANDS ASSOCIATION, INC.  
Ref. Number: N05000000183

We have received your document for SILVER SANDS 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 document must be signed by a member or an authorized representative of a member.

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 319A00015686

RECEIVED  
2019 AUG 13 PM 3:30  
SUNBIZ.ORG

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Silver Sands Association, Inc.

Name of Corporation

**DOCUMENT NUMBER:** N05000000183

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:

Sandy Ellis Comm. Assn Mgr LOA, CMCA, AMS  
Name of Contact Person

RVA Resort Vacations.  
Firm/Company

4030 Golf of Mexico Dr.  
Address

Longboat Key FL 34228  
City/State and Zip Code

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

For further information concerning this matter, please call:

Sandy Ellis at ( 866 ) 870-6596  
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: Silver Sands Association, Inc.
2. The principal office address: 5841 Gulf of Mexico Drive, Longboat Key, FL 34228
3. The mailing address (if different): 4030 Gulf of Mexico Drive, Longboat Key, FL 34228
4. Date of incorporation/qualification: 01/05/2005 Document number: N05000000183

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)

Becker & Poliakoff, P.A.
6230 University Parkway, Suite 204
Sarasota, FL 34240

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

Becker & Poliakoff, P.A.
1819 Main Street, Suite 905
Sarasota, FL 34236
P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA

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]
Signature of an officer or director

ROBERT W. BROWNING, JR., SECRETARY
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]
Signature of Registered Agent

6/26/19
Date

If signing on behalf of an entity:

Kevin L. Edwards, Esq.
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