N050000000918

| (Re | equestor's Name) | |
|---|--------------------|-------------|
| (Ad | idress) | <u> </u> |
| (Address) | | · |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Ви | usiness Entity Nar | ne) |
| (Document Number) | | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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DIVISION OF CORPORALIES

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COVER LETTER

| Division of Corporations | | | |
|--|---|--|--|
| PHILLIPS OSPREY LANDING CONDOM | | | |
| Name of Corp. | oration — | | |
| DOCUMENT NUMBER: N0500000918 | | | |
| The enclosed Statement of Change of Registered Office/A | gent and fee are submitted for filing. | | |
| Please return all correspondence concerning this matter to | the following: | | |
| HUGH MILLER | | | |
| Name of Contact Person | | | |
| | | | |
| Firm/Comp | anv | | |
| 5518 PHILLIPS ST | , | | |
| Address | | | |
| | | | |
| BOKEELIA FL 33922 | | | |
| City/State and Zip Code | | | |
| hmiller) 49 | HIP AN . COM | | |
| E-mail address: (to be used for future annual report notification) | | | |
| • | | | |
| For further information concerning this matter, please call: | | | |
| HUGH MILLER | .843 .276-5686 | | |
| Name of Contact Person | t (843) 276-5686 Area Code & Daytime Telephone Number | | |
| Enclosed is a \$35.00 check made payable to the Departmen | nt of State. | | |
| | | | |
| Mailing Address: | Street Address: | | |
| Amendment Section | Amendment Section | | |
| Division of Corporations P.O. Box 6327 | Division of Corporations Clifton Building | | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | | |
| rananassee, r L 52514 | 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: PHILLIP OSPREY LANDING CONDOMINIUM ASSOCIATION INC |
| 2. The principal office address: |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 01/27/2006 Document number: N0500000918 |
| 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) |
| BARRY WOODROW |
| 1059 NE PINE ISLAND RD STE 2 |
| CAPE CORAL FL 33909 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| HUGH MILLER |
| P.O. Box NOT acceptable BOKEELIA FL 33922 |
| 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. |
| HUGH MICEL PRESIDENT Printed or typed name and title |
| Thereby accept the appointment as registered agent and agree to act in this capacity. If 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. |
| Hugh B. Miller Gent Signature of Registered Agent Date |
| It signing on behalf of an entity: |
| Typed or Printed Name |