

N050000004618

No Return Address
(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

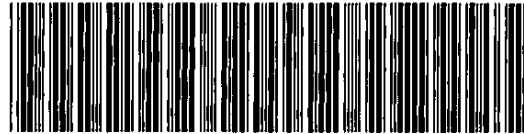
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

*Corrected document
by telephone - Can
1/24/08*

Office Use Only



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FILED
08 JAN 24 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 4, 2008

BEACH CLUB 160 CONDOMINIUM ASSOCIATION, INC.
C/O DEPENDABLE PROPERTY MANAGEMENT
1300 PINETREE DR STE 9
INDIAN HARBOUR BEACH, FL 32937

SUBJECT: BEACH CLUB 160 CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N05000004618

We have received your document for BEACH CLUB 160 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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Our records shows your current registered agent resigned on 10/12/07. The new registered agent information should be typed in block #6.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 608A00000664

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 JAN 24 AM 10:00

**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: Beach Club 1600 Condominium Association, Inc.
2. The principal office address: 630 Island Club Dr. Indiantown, FL - 32903
3. The mailing address (if different): C/O Dependable Property Management, LLC 1300 Pine Tree Dr. Ste 9, I. H. B. FL-32937
4. Date of incorporation/qualification: _____ Document number: _____
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Hart, James, W Jr. Resigned 10/14/07
2180 W SR 434, Ste 500
Longwood, FL 32779-5044

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

DEPENDABLE PROPERTY MANAGEMENT, LLC
1300 PINE TREE DR. SUITE 9
INDIAN HARBOUR BEACH, FL. 32937

(P.O. Box NOT acceptable)

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SECRETARY OF STATE

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.

Robin L Shockey
(Signature of an officer or director)

Robin Shockey, 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.

Angela M. Phillips, CPA, CAM
(Signature of Registered Agent)

13 Dec 07
(Date)

If signing on behalf of an entity:

DEPENDABLE PROPERTY MANAGEMENT, LLC
(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