

NO50000005188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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08/11/14--01031--025 **35.00

La change

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cypress Plaza Office Condominium Association, Inc
Name of Corporation

DOCUMENT NUMBER: 105000005188

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:

Marc Bellapianta
Name of Contact Person

Watson Realty Corporation #.
Firm/Company

1410 Palm Coast Parkway, NW
Address

Palm Coast FL 32137
City/State and Zip Code

MBELLAPIANTA@WATSONREALTY.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Susan Matthews at (386) 246 9270
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
14 SEP 15 AM 10:57
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

August 20, 2014

SUSAN MATTHEWS
WATSON REALTY CORPORATION ASSOCIATION
1410 PALM COAST PARKWAY NW
PALM COAST, FL 32137

SUBJECT: CYPRESS PLAZA OFFICE CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N05000005188

We have received your document for CYPRESS PLAZA OFFICE 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):

You have completed the wrong application. Please complete the proper registered agent change form which is attached.

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.

Diane Cushing
Senior Section Administrator

Letter Number: 714A00017956

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Cypress Plaza Office Condominium Association, Inc
2. The principal office address: 145 Cypress Point Parkway
Palm Coast, FL 32164
3. The mailing address (if different): PO Box 350453
PALM COAST, FL 32135
4. Date of incorporation/qualification: 05/18/2005 Document number: N05000005188
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)

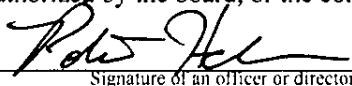
Hagler Palm Coast Property Management
50 Leanni Way, Suite B6
Palm Coast, FL 32137

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

Watson Realty Corporation
1410 Palm Coast Parkway NW
P.O. Box NOT acceptable
Palm Coast, FL 32137

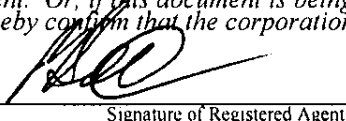
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 of an officer or director

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.


Signature of Registered Agent

8-26-14
Date

If signing on behalf of an entity:

MARC BELLAPANTA
Typed or Printed Name

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