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(Requestor's Name) (Address)	600158523656	
(City/State/Zip/Phone #)	e state e	्र २ %
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COVER LETTER

Division of Corporations

SUBJECT: BAY VILLAS CONDO. ASSN. OF ST. PETENS BURG. INC.

Name of Corporation

DOCUMENT NUMBER: NO500000 7802

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:

RANDY C. MOODY

Name of Contact Person

RCM PROPERTY Mami, INC.

Po Box 47364
Address

57- PETERS 13 URG FC 33743
City/State and Zip Code

R MOONY B TAMPARAY. RR. com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ranny C. Moory at (727) 575 - 4653

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

TO:

Amendment Section

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: BAY VILLAS CONDUMINION ASSOCIATION
2. The principal office address: 125 5th Ave N.E.
51 Defershing II 33715
20 Any 11021
3. The mailing address (if different): U. DDX, 41304
= 31, petersourg, r1 33 143
4. Date of incorporation/qualification: 07-89-2005 Document number: No 500000 7802
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)
PBM, 5-90/ SUN BGVD.
\$ 8M, 5-901 SUN BLVD. # 203, ST. PETERSBURG FC 8 FEB
203, SI. FETERSBURG PC
337/5
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): **Registered of the new registered agent (if changed) and /or registered office (if changed): **Registered of the new registered agent (if changed) and /or registered office (if changed):
73 -
RANDY C. MOODY P.O. Box NOT acceptable
6157 31ST AVENUE NORTH, ST. PERSBURG FL
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 Signature of an officer or director Signature of an officer or director
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 Date
If signing on behalf of an entity:
RANDY C. MODDY Typed or Printed Name

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