N05000000088

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(Re	equestor's Name)	
(Ad	ldress)	
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(Cil	ty/State/Zip/Phone	= #) .
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RA Clarge



100R-107

COVER LETTER

Amendment Section Division of Corporations . TO:

SUBJECT: GULF BREEZE CONDOMINIUM ASSOCATION OF STEINHATCHEE, INC. (Name of Corporation)
DOCUMENT NUMBER: NO50000008088
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:
WESTON BAUR (Name of Contact Person)
ED BAUR MANAGEMENT INC. DBA FLORIDA COMMUNITY MANAGEMENT
(Firm/Company)
1731 NW 6TH STREET STE A (Address)
GAINESVILLE FL 32609
(City/State and Zip Code)
For further information concerning this matter, please call:
WESTON BAUR at (352) 244-1503
(Name of Contact Person) at (352) 244-1503 (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

statement of change	visions of sections 607.0502, 617 is submitted for a corporation o change its registered office or re	rganized under the laws of the S	State ofFLORIDA
1. The name of the c	corporation: GULF BREEZE CO	ONDOMINIUM ASSOCIATION	OF STEINHATCHEE, INC.
2. The principal office	ce address: 1731 NW 6TH S	TREET STE A	
	GAINESVILLE F	L 32609	
3. The mailing addre	ess (if different): PO BOX 14	506	
	GAINESVIL	LE FL 32504	
4. Date of incorpora	ation/qualification: 02/17/200	6 Document number:	N050000008088
5. The name and stre Florida Departme	eet address of the current registe ent of State:	red agent and registered office of	on file with the
	BURT THEODORE	M ESQ	
_	114 NE FIRST	STREET	TEGET TO
	TRENTON FL 32	693	55 73 M
(if changed):	eet address of the new registered ESTON BAUR/ED BAUR MANA BA FLORIDA COMMIUNITY	AGEMENT INC.	stered office F. F. S. F
•	731 NW 6TH STREET STE		7'
	(P.O. Box NOT acc	ceptable)	
GA	AINESVILLE FL 32609		
The street address as changed will be	of its registered office and the identical.	street address of the business of	office of its registered agent,
	authorized by resolution duly account or the corporation has be		
1/10	of an officer or director)	Feeder	ed name and title)
V. D	e appointment as registered ag comply with the provisions of a I am familiar with and accept to filed merely to reflect a chang een notified in writing of this co	,	•
With bour	_	10-16-07	
(Signal	ture of Registered Agent)	(D	atc)
If signing on beha	If of an entity:		
NESTON BA	ed or Printed Name)		

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