

ND5000008381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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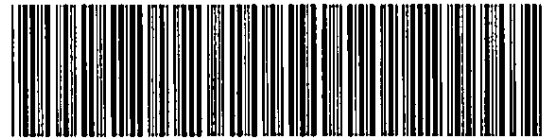
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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MAY 18 2018
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CREEK'S EDGE PHASE II, HOME OWNERS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N05000008381

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:

Robin Bennett

Name of Contact Person

Southern Shores Realty, Inc.

Firm/Company

8736 Ortega Park Drive

Address

Navarre, FL 32566

City/State and Zip Code

robinsellsnavarre@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robin Bennett

Name of Contact Person

at (**850**) **939-9377**

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

May 9, 2018

ROBIN BENNETT
SOUTHERN SHORES REALTY, INC.
8736 ORTEGA PARK DRIVE
NAVARRE, FL 32566

SUBJECT: CREEK'S EDGE PHASE II, HOME OWNERS ASSOCIATION, INC.
Ref. Number: N05000008381

We have received your document for CREEK'S EDGE PHASE II, HOME OWNERS 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):

The document must have original signatures.

A printed signature is not acceptable.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 818A00009637



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: CREEK'S EDGE PHASE II, HOME OWNERS ASSOCIATION, INC.

2. The principal office address: 8173 East Bay Blvd - Suite A
Navarre, FL 32566

3. The mailing address (if different): Same

4. Date of incorporation/qualification: 08/11/2005 Document number: N05000008381

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)

Carl J. Robbins - RESIGNED

8173 East Bay Blvd - Suite A

Navarre, FL 32566

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

Robin Bennett - Southern Shores Realty, Inc.

8736 Ortega Park Drive

P.O. Box NOT acceptable

Navarre, FL 32566

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.

X [Signature]
Signature of an officer or director

Carl J. Robbins, Director

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]
Signature of Registered Agent

5/14/18
Date

If signing on behalf of an entity:

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

CR2E045 (03/12)

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