

00789, 00524, 00706, 80071

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Westpointe Plaza Condominium Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N05000009951

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:

S. Negron

(Name of Contact Person)

Westpointe Plaza Condominium Association

(Firm/Company)

P.O. Box 350277

(Address)

Palm Coast, FL 32135-0277

(City/State and Zip Code)

For further information concerning this matter, please call:

S. Negron

(Name of Contact Person)

at (386) 446-6333

(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

September 18, 2008

Westpointe Plaza Condominium
1190 Pelican Bay Dr.
Daytona Beach, FL 32119

SUBJECT: WESTPOINTE PLAZA CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N05000009951

We have received your document for WESTPOINTE PLAZA 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):

A post office address is not acceptable for the principal office. The principal office must be a street address. The mailing address may be a post office box.

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) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 308A00050703

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: Westpointe Plaza Condominium Association, Inc.
2. The principal office address: 7 FLORIDA PARK DRIVE, N, SUITE C
Palm Coast, FL 32137
3. The mailing address (if different): P.O. Box 350277
PALM COAST, FL 32135-0277
4. Date of incorporation/qualification: 9/26/05 Document number: N05000009951
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Michele J. Barkin

1190 Pelican Bay Drive

Daytona Beach, FL 32119

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

Fred Annon, Jr., Southern States Management Group

7 Florida Park Drive N., suite C

(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.

Chris Pagan
(Signature of an officer or director)

Chris Pagan Sec. Tres.
(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)

09-11-2008
(Date)

If signing on behalf of an entity:

Fred Annon, Jr.

(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 (8/05)

FILED
2008 OCT 27 PM 14:55
TALLAHASSEE, FLORIDA
SECRETARY OF STATE