

N05998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
OCT 17 PM 4:15

RA. Ch.
C.COULLIETTE

OCT 18 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SANDPOINT CONDOMINIUM MANAGEMENT ASSOC. INC
Name of Corporation

DOCUMENT NUMBER: N05998

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:

NINA PANDELOS

Name of Contact Person

SANDPOINT CONDOMINIUM MANAGEMENT ASSOC. INC
Firm/Company

2615 S. ATLANTIC AVE

Address

DAYTONA BEACH SHORES, FLA. 32118

City/State and Zip Code

NINA/SANDPOINT C AOL. COM

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

For further information concerning this matter, please call:

NINA PANDELOS

Name of Contact Person

at (386) 767 8202

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**

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: SANDPOINT CONDOMINIUM MGMT. ASSOC. INC.
2. The principal office address: 2615 SOUTH ATLANTIC AVE
DAYTONA BEACH SHORES, FLA 32118
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1984 Document number: N05998

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)

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

PAT HUKIL
2445 S. PALMENTO CIRCLE
P.O. Box NOT acceptable
SOUTH DAYTONA, FLA 32119

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]
Signature of an officer or director

NINA PANDELOS
MANAGER
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

10/13/2011
Date

If signing on behalf of an entity:

PAT HUKILL
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)

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