N60000013

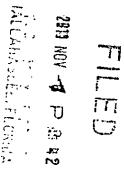
(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(C)	ity/State/Zip/Phone	a #1)
(0)	ity/State/Zip/Filone	= 11)
PICK-UP	☐ WAIT	MAIL
(B)	usiness Entity Nar	ne)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



000319790650

10/19/18--01014--004 **35.00



NOV 0 7 2018 T. LEMEUX MO

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Millstone Association, Inc.

N06000000013

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:

Fernando Phillips

Name of Contact Person

Castle Group

Firm/Company

2055 N Millstone Boulevard

Address

Vero Beach, FL 32968

City/State and Zip Code

fphillips@castlegroup.com

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

For further information concerning this matter, please call:

Fernando Phillips

772

794-2021

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



October 26, 2018

CHARLES O VOGEL 1961 NEWMARK CIR SW VERO BEACH, FL 32968

SUBJECT: MILLSTONE ASSOCIATION, INC.

Ref. Number: N0600000013

We have received your document for MILLSTONE 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 business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 418A00022112



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: Millstone Association, Inc.	
2. The principal office address: 2055 N. Millstone Boulevard, Vero Beach, FL 32968	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 12/30/2005 Document number: N0600000013	
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)	
Christian, O'Ryan	
2701 North Rocky Point Drive Suite 900	
Tampa, FL 33607	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Charles Vogel	
1961 Newmark Circle SW P.O. Box NOT acceptable	
Vero Beach, FL 32968	
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.	
Charles O. Vogel, President	
Signature of an officer of differor 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. November 5, 2018	
Signature of Registered Agent Date If signing on behalf of an entity: Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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