## NO600000 4995

(Requestor's Name)
(Address)
(Address)
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☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Saint Andrews Harbor Condominium Name of Corporation
DOCUMENT NUMBER: NO6000004995
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:
St. Andrews Harbor Condo Associate Person
Firm/Company
1301 Beck Avenue
Pancinci City/State and Zip Code - 32401
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Saint Andrews Harbor Conde
2. The principal office address: 1301 BECK AVENUE  Panama City FI 32401
2.77
3. The mailing address (if different):
4. Date of incorporation/qualification: 5.5.0 \( \text{D} \) Document number: \( \text{N 0 6 0 0 0 0 4 90} \)
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)
Thruston I cam (regioned)
13-1011201, USG 1111 CSIGITES
1301 Beck Ave Ottice
Parama City El 20101 10 0
Panama City, I-L, Sayor & =
6. The name and street address of the new registered agent (if changed) and /or registered office.
(if changed):
Dan Hudson
030 00000 5001 0
452 Hypes XOTT CIPCLE &
P.O. Box NOT acceptable
JUIMMA CITY, IL, SOUND
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 of an officer or 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.
Van Hudson 1-10-19
Dute
If signing on behalf of an entity:
LM Thomas on
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 \* \* \*

CR2E045 (03/12)