

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Palm Beach Water View Homes Owners Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N06000006692

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:

Garth Bonney
Name of Contact Person

Bonney & Associates, P.A.
Firm/Company

514 Magnolia Avenue
Address

Panama City, Florida 32401
City/State and Zip Code

gbonney@bandslaw.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Garth Bonney at (850) 215-6840
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 4, 2017

GARTH BONNEY
BONNEY AND ASSOCIATES, PA
P.O. BOX 737
PANAMA CITY, FL 32402

SUBJECT: PALM BEACH WATER VIEW HOMES OWNERS' ASSOCIATION
INC.
Ref. Number: N06000006692

We have received your document for PALM BEACH WATER VIEW HOMES OWNERS' ASSOCIATION INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The fee to file your document is \$35.

There is a balance due of \$10.00.

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: 517A00020042

RECEIVED
OCT 18 PM 1:28
DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA

17 OCT 18 PM 1:28

RECEIVED

www.sunbiz.org

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: Palm Beach Water View Homes Owners Association, Inc.

2. The principal office address: 5143 Deep Water Court Panama City, Florida 32404

3. The mailing address (if different): P.O. Box 15819 Panama City, Florida 32406

4. Date of incorporation/qualification: 06/21/2006 Document number: N06000006692

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)

Michael McQuaig
5143 Deep Water Court
Panama City, Florida 32404

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

Garth Bonney
514 Magnolia Avenue
Panama City, Florida 32404

P.O. Box NOT acceptable

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

Michael McQuaig
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 of Registered Agent

10-12-17
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 (05/12)

FILED
2017 OCT 18 PM 3:28