

NO6000010662

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

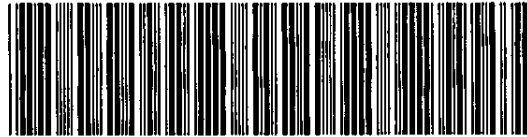
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Mallards Cove Condominium Association, Inc  
Name of Corporation

DOCUMENT NUMBER: NO6000010662

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:

Darren Gann  
Name of Contact Person

Waypoint Residential Management Services  
Firm/Company

7284 West Palmetto Park Road, Suite 201  
Address

Boca Raton, FL 33433  
City/State and Zip Code

DGann@waypointliving.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Darren Gann at ( 561 ) 289-8729  
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 2, 2015

WAYPOINT RESIDENTAL  
7284 W PALMETTO PARK RD STE 201  
BOCA RATON, FL 33433

SUBJECT: MALLARD'S COVE CONDOMINIUM ASSOCIATION, INC.  
Ref. Number: N06000010662

We have received your document for MALLARD'S COVE 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):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document accordingly.

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: 315A00020919

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15 OCT 23 AM 9:53

Please see amended name for the implementation of change to new registered agent. Please call me if you have any questions.

Amy Garaycochea  
(561) 826-3917

Thank You

**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 FLA. in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Mallards Cove Condominium Association, Inc.
2. The principal office address: 6701 Mallards Cove Road, Building 47  
Junete, Florida 33458
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/11/2000 Document number: N26000010662
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)

TERRY WAYLAND  
3414 Forum Blvd Suite 3  
Fort Myers, FL 33905

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

Waypoint Property Management, LLC  
Waypoint Property Management, LLC  
7284 West Palm Beach Pkwy, Suite 201  
Boca Raton, FL 33433

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]  
Signature of an officer or director

H. L. [Signature]  
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

7/9/15  
Date

If signing on behalf of an entity:

[Signature]  
Typed or Printed Name

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