(Requestor's Name)			
(Address)	200235452862		
(Address)			
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL	05/29/1201005026 **3		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status	<b>S4</b>		
Special Instructions to Filing Officer:	SECTION 29 AN S.		

Office Use Only

\*\*35.00

## **COVER LETTER**

TO:	Amendment Section Division of Corporations				
SUBJE	ECT: Galia at Lost Key Marina & Yacht Name of Corpora	Club Condo Assoc.			
DOCU	JMENT NUMBER: N070000	01162			
The enc	iclosed Statement of Change of Registered Office/Agen	at and fee are submitted for filing.			
Please r	return all correspondence concerning this matter to the	following:			
Ted Johnson Name of Contact Person					
	Name of Contact P	CISOII			
	Perdido Sand Rea	alty, Inc			
	Firm/Company				
	5615 Bauer R Address	Rd			
	Address				
	Pensacola, FL 3	2507			
	City/State and Zip				
•	Ted@perdidosano	1 com			
Ted@perdidosand.com  E-mail address: (to be used for future annual report notification)					
For furt	rther information concerning this matter, please call:				
	Shawn Millard at (	850 ) 492-2000			
	Name of Contact Person	Area Code & Daytime Telephone Number			
Enclose	sed is a \$35.00 check made payable to the Department of	of State.			
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Division of Corporations	Division of Corporations			
	P.O. Box 6327	Clifton Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a co	rporation organize	507.1508, or 617.1508, Flow d under the laws of the State d agent, or both, in the State	<sub>e of</sub> <u>Florida</u>
1. The name of t	he corporation: Galia	at Lost Key M	larina & Yacht Clut	o Condo Assoc.
2. The principal	office address: 10099 I	E. Nelle Ave. P	ensacola, FL 32507	
3. The mailing a	ddress (if different):_PO	Box 34317 Pe	nsacola, FL 32507	
4. Date of incorp	ooration/qualification:	02/01/07	Document number:	N07000001162
	street address of the cur tment of State: (If resign		nt and registered office on fi	le with the
	Perdido Sand Real	ty, Inc.		<del></del>
	10281 Sorrento Rd	. Ste C		2012 SEC
	Pensacola, FL 325	07		
6. The name and (if changed):	I street address of the nev	v registered agent (	if changed) and /or registere	ed office
	Perdido Sand Real	ty, Inc.		
	5615 Bauer Rd			
	Poposolo El 225	P.O. Box NOT ac	eceptable	
	Pensacola, FL 325	,		·
The street address changed will	ess of its registered offic be identical.	e and the street ad	dress of the business office	e of its registered agent,
Such change wa	as authorized by resolutine board, or the corporat	on duly adopted b	y its board of directors or lied in writing of the chang	by an officer so
1/am	en Almel		Dames H	einold BIPF
//		stered agent and a sions of all statute d accept the obliga t a change in the r g of this change.	agree to act in this capacity is relative to the proper an attion of my position as region egistered office address, I	d complete performance istered agent. Or, if this hereby confirm that the
Sig	nature of Registered Agent	<i>7</i> .	Date	-/20/12
If signing on be	hall of an entity:			
TED 3	DOHNISON			
T	yped or Printed Name			

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