(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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CCT 24 2017

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Midway 200 Center Property Owners Association

Name of Corporation

DOCUMENT NUMBER, NO700001211

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:

Roy T. Boyd III

Name of Contact Person

Boyd Real Estate Group

Firm/Company

1720 SE 16th Ave., Building 200

Address

Ocala, FL 34471

City/State and Zip Code

tboyd@boydrealestategroup.com

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

For further information concerning this matter, please call:

Sharon Oliver

,352

387-2370

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

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

Pursuant to the provisions of sections 607.0502, 617. statement of change is submitted for a corporation or	ganized under the laws of the State of Florida	
	gistered agent, or both, in the State of Florida.	
1. The name of the corporation: Midway 200 Ce	nter Property Owners Association	
2. The principal office address: 1720 SE 16th A	venue, Building 200, Ocala, FL 34471	<u> </u>
		<u> </u>
3. The mailing address (if different): SAME		<u> </u>
4. Date of incorporation/qualification: 2/02/2007	Document number: N0700001211	
5. The name and street address of the current registere Florida Department of State: (If resigned, enter res	ed agent and registered office on file with the	
Roy T. Boyd III		
1720 SE 16th Avenue, Bu	ilding 200	3
Ocala, FL 34471	MAX 2	3
6. The name and street address of the new registered (if changed):	agent (if changed) and /or registered office	
Chris Armstrong		3
1415 SW 17th Street		
	NO l'acceptable	
Ocala, FL 34474		
The street address of its registered office and the str as changed will be identical.		gent.
Such change was authorized by resolution duly ado authorized by the board, or the corporation has been	pted by its board of directors or by an officer so notified in writing of the change.	
1673	Roy T. Boyd, Manager	
I hereby accept the appointment as registered agent further agree to comply with the provisions of all performance of mylduties, and I am familiar with an agent. Or, if this document is being filed merely to hereby confirm that the corporation has been notification.	statutes relative to the proper and complete nd accept the obligation of my position as registere reflect a change in the registered office address, I	d
Signature of Registered Agent	Date	\
If signing on behalf of an entity.		ļ
Chris Armstrong		
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 (03/12)