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R. WHITE

13 MAY -3 PM 5: QQ SECRETARY OF STATE

COVER LETTER

Amendment Section Division of Corporations TO: EMERALD BEACH RESORT MASTER ASSOCIATION, INC. SUBJECT Name of Corporation N07000001392 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: William S. Henry, Esq. Name of Contact Person Burke, Blue, Hutchison, Walters, & Smith, P. A. Firm/Company 221 McKenzie Avenue Address Panama City, Florida 32401 City/State and Zip Code bhenry@burkeblue.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: William S. Henry Name of Contact Person 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

CR2E045 (03/12)

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida St nange is submitted for a corporation organized under the laws of the State of <u>F</u> ter to change its registered office or registered agent, or both, in th e State of Fl	lorida	
1. The name of	the corporation: EMERALD BEACH RESORT MASTER ASS	OCIATIO	ON, INC
2. The principa	al office address: 14700 Front Beach Road, Suite #1, Panama City Be	ach, Flori	da 32413
3. The mailing a	address (if different):		
4. Date of incor	rporation/qualification: 02/08/2007 Document number: N07000	001392	
	nd street address of the current registered agent and registered office on file with artment of State: (If resigned, enter resigned)	h the	
	CORPORATE CREATIONS NETWORK, INC.		
	11380 Prosperity Farms Road #221E		
	Palm Beach Gardens, FL 33410	ANG SEC	•
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	RETARY AMASSE	
	William S. Henry, Esq.	<u>jiji</u> 🔾	TI.
	221 McKenzie Avenue	FSTA FLOG	
	P.O. Box NOT acceptable Panama City, Florida 32401	ONIDA ONIDA	3
The street addre	ress of its registered office and the street address of the business office of its be identical.	registered a	igent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an of he board, or the corporation has been notified in writing of the change.	fficer so	
Kinalu Signalu	Kenneth A. Powell Fried or typed mains and life	ident	
hereby accept further agree to verformance of gent. Or, if the hereby confirm	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp (my duties, and I am familiar with and accept the obligation of my position out the property of the company of the registered office that the carporation has been notified in writing of this change.	lete 15 registere oddress, J	rd
- [M.].	Multire of Régislered Agent 4/ 29/13 Date	· · · · · · · · · · · · · · · · · · ·	
f signing on be	chalf of an entity:		
Ту	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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