| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations Indian Beach-Sapphire Shores Neighborhood Association SUBJECT: Name of Corporation DOCUMENT NUMBER 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: Kathryn H. Cannon Name of Contact Person **IBSSA** Firm/Company P.O. Box 49673 Address Sarasota, FL 34234 City/State and Zip Code rick@cannonrick.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kathryn H. Cannon Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Mailing Address: Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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

| statement of cha | inge is submitted for a corporation o | 7.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of egistered agent, or both, in the State of | Florida |
|---|--|---|---------------------------|
| 1. The name of | the corporation: Indian Beach- | Sapphire Shores Neighborh | nood Association |
| 2. The principal | office address: 405 Sapphire I | Drive, Sarasota, FL 34234 | |
| 3. The mailing a | address (if different): same | | |
| 4. Date of incorporation/qualification: 5/16/85 Document number: N09330 | | | |
| 5. The name and | | red agent and registered office on file v | |
| | Tebrugge, Adam | | _ |
| | 520 12th Street W. #203 | | |
| | Bradenton, FL 34234 | | TA 68 |
| 6. The name and (if changed): | d street address of the new registered | agent (if changed) and /or registered o | FILE MIG -7 MATASSE |
| | Jane Nutter Johnson | · · · · · · · · · · · · · · · · · · · | 二二 里口 |
| | 405 Sapphire Drive | | 3: 3: ORIE |
| | Sarasota, FL 34234 | NOT acceptable | |
| The street address changed will | ess of its registered office and the st be identical. | reet address of the business office of i | ts registered agent, |
| Such change was authorized by the | as authorized by resolution duly addene board, or the corporation has bee | opted by its board of directors or by an n notified in writing of the change. | officer so |
| Signati | Kathryn H. Cannon, Treasurer Signature of an officer or director Printed or typed name and title | | |
| I further agree performance of agent. Or, if th | "my duities, and I am familiar with a | statutes relative to the proper and cor nd accept the obligation of my positio reflect a change in the registered offi | n as registered |
| auth | h Show | 08/02/18 | |
| | nature of Registered Agent chalf of an entity: | Date | |
| Jane Nutte | | | |
| | vived or Printed Name | | |

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