

N12081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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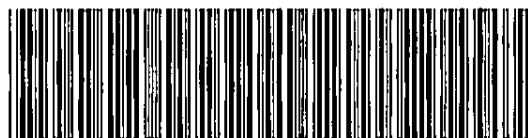
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cape Winds Condominium Association, Inc
Name of Corporation

DOCUMENT NUMBER: N12081

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:

Penelope Holladay

Name of Contact Person

Coastal Living Community Management, LLC

Firm/Company

120 Portside Ave Unit 203

Address

Cape Canaveral, FL 32920

City/State and Zip Code

contact@coastalivingcam.com

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

For further information concerning this matter, please call:

Penelope Holladay

Name of Contact Person

at

(321

) 693-5225

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. The name of the corporation: Cape Winds Condominium, Inc. Association,
2. The principal office address: C/O Coastal Living Community Management, LLC
120 Portside Avenue, Unit 203, Cape Canaveral, FL 32920
3. The mailing address (if different): 7400 Ridgewood Ave, Cape Canaveral, FL 32920
4. Date of incorporation/qualification: 02/13/1996 11/14/1985 Document number: N12081
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)

Sentry Management- Resigned Inc.

2180 WEST SR 434

SUITE 5000

LONGWOOD, FL 32779

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

Coastal Living Community Management, LLC

120 Portside Avenue, Unit 203, Cape Canaveral, FL 32920

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.

Gail Cox
Signature of an officer or director

Gail Cox, Secretary

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.

Penelope Holladay
Signature of Registered Agent

07/13/2020

Date

If signing on behalf of an entity:

Penelope Holladay, LCAM, President Coastal Living

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

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