

NI5015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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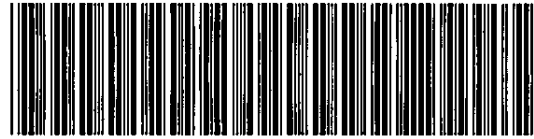
(Business Entity Name)

(Document Number)

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Change

04/18/14--01017--023 \*\*35.00

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2014 APR 18 PM 1:23  
TALLAHASSEE, FLORIDA

DR  
4/24/14

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Gables of Vero Beach Condominium Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N15015

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:

Deborah L. Ross, Esquire  
Name of Contact Person

Ross Earle & Bonan, P.A.  
Firm/Company

789 S. Federal Hwy, Suite 101  
Address

Stuart, FL 34994  
City/State and Zip Code

dlr@reblawpa.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah L. Ross, Esq. at ( 772 ) 287-1745  
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, 617.0502, 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: The Gables of Vero Beach Condominium Association, Inc.
- 2. The principal office address: 2700 Ocean Drive, Vero Beach, FL 32963
- 3. The mailing address (if different): 835 20th Place, Vero Beach, FL 32960
- 4. Date of incorporation/qualification: 2/24/89 Document number: N15015

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)

Elliott Merrill Community Management  
835 20th Place  
Vero Beach, FL 32960

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

Deborah L. Ross, Esquire/Ross Earle & Bonan, P.A.  
789 S. Federal Highway, Suite 101  
P.O. Box NOT acceptable  
Stuart, FL 34994

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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.

x [Signature]  
Signature of the origin officer or director

x Merrell Garvin President  
Printed or typed name and title  
Gables of Vero Beach  
Condo. Assoc.

*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.*

[Signature]  
Signature of Registered Agent

4/10/14  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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