

015 890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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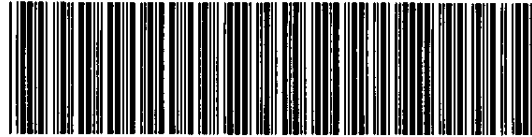
(Business Entity Name)

(Document Number)

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FEB 26 2015
T. L. JAMES
[Signature]

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Isle at Mission Bay Homeowners' Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N 15890

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:

Mark Jacobs
Name of Contact Person

A i N Management
Firm/Company

902 Clint Moore Road
Address

Boca Raton FL 33487
City/State and Zip Code

mark.j@managing-properties.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nancy Piper at (954) 458-9393
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 Isle of Palms Mission Bay Homeowners' Association
2. The principal office address: 902 Clint Moore Road, Boca Raton, FL 33487

3. The mailing address (if different): 902 Clint Moore Road
Boca Raton, FL 33487

4. Date of incorporation/qualification: 7/16/1986 Document number: N15890

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)

United Community Management Corp.
11784 West Sample Road
Coral Springs FL 33065

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

Stevens and Baldwin, P.A.
2 South University Drive #327
P.O. Box NOT acceptable
Plantation FL 33324

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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 Joseph Altmeppen
Signature of an officer or director

JOSEPH ALTMEPPEN
Printed or typed name and title
President

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

2/17/15
Date

If signing on behalf of an entity:

John W. Stevens, V.P.
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