## 1110834

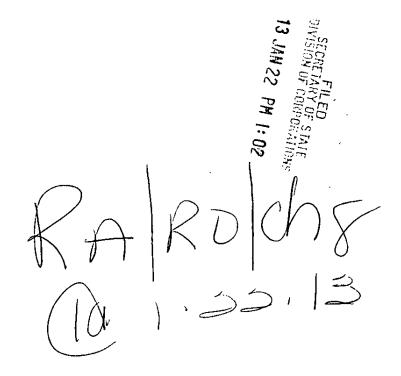
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## **COVER LETTER**

7.,

TO: Amendment Section Division of Corporations		
SUBJECT: Castaway Cove Wave VI Homeowners Association, Inc.		
Name of Corporation		
DOCUMENT NUMBER: N16834		
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:		
Jane L. Cornett, Esq.		
Name of Contact Person		
Becker & Poliakoff, P.A.		
Firm/Company		
401 SE Osceola Street, First Floor		
Address		
Stuart, FL 34994		
City/State and Zip Code		
charity@archoice.com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Charity Gruwell, CAM  Name of Contact Person  at (772 ) 567-0808  Area Code & Daytime Telephone Number		
Name of Contact Person Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Street Address:		

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	nge is submitted for a corporation organized under the laws of the State of Florida
	r to change its registered office or registered agent, or both, in the State of Florida.
	he corporation: Castaway Cove Wave VI Homeowners Association, Inc.
	office address: 333 17th Street Suite 2L
Vero Bea	ch, FL 32960
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 9/17/1986 Document number: N16834
	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	Charles McKinnon
	3055 Cardinal Drive, Suite 302
	Vero Beach, FL 32963
6. The name and (if changed):	Jane L. Cornett, Esq.  401 SE Osceola Street, First Floor P.O. Box NOT acceptable  Stuart, FL 34994
	Jane L. Cornett, Esq.
	401 SE Osceola Street, First Floor
	P.O. Box NOT acceptable  Stuart, FL 34994
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
Cono	re of an officer or effector Printed or typed name and title
I further agree to performance of agent. Or, if the	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 complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Sig	hature of Registered Agent Date
If signing on be	half of an entity:
T	yped or Printed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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