

10/31/22, 8:02 AM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

N17453

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000371497 3)))



H220003714973ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : URS AGENTS LLC
Account Number : I20150000127
Phone : (800)567-4397
Fax Number : (800)567-4398

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

REGISTERED AGENT CHANGE
CONGRESS PARK SOUTH OWNERS ASSOCIATION, INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RECEIVED
DIVISION OF STATE
CORPORATIONS
FALLS, FLA.

2022 OCT 31 PM 4: 23

APPROVED
AND
FILED

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CONGRESS PARK SOUTH OWNERS ASSOCIATION, INC.
Name of Corporation

DOCUMENT NUMBER: N17453

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:

Roxanne K. Beilly

Name of Contact Person

CONGRESS PARK SOUTH OWNERS ASSOCIATION, INC.

Firm/Company

420 SOUTH CONGRESS AVENUE

Address

DELRAY BEACH, FL 33445

City/State and Zip Code

rbeilly@gmail.com

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

For further information concerning this matter, please call:

URS AGENTS C/O LAUREN JOHNSON

Name of Contact Person

at (800) 567-4397

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

1. The name of the corporation: CONGRESS PARK SOUTH OWNERS ASSOCIATION, INC.
2. The principal office address: 420 S CONGRESS AVE. DELRAY BEACH, FL 33445
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/22/1986 Document number: N17453
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)

URS AGENTS INC.

3458 LAKESHORE DR

TALLAHASSEE, FL 32312

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

URS AGENTS, LLC

3458 LAKESHORE DR

P.O. Box NOT acceptable

TALLAHASSEE, FL 32312

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.

Christine Chambers

Signature of officer or director

Christine Chambers, President

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.

Lauren Johnson

Signature of Registered Agent

10/28/2022

Date

If signing on behalf of an entity:

LAUREN JOHNSON, ASST. SECRETARY

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

CR2E045 (04/13)

APPROVED
AND
FILED

2022 OCT 31 PM 4:23