N20829

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·			
(Ad	dress)				
(Ad	dress)	- · · · - ·			
(Cit	y/State/Zip/Phone	e #)			
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(Bu	siness Entity Nar	ne)			
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Roberts NOV:1-2:2010

COVER LETTER

TO:	Amendmen Division of	nt Section f Corporations					
SUBJ	ECT: P	ensacola Str	reet Neighbor Name of C	hood A	Assoc n	iation, In	IC.
DOCU	MENT NU	MBER:		120829	9		
The en	closed State	ment of Change o	f Registered Office	e/Agent a	ınd fee a	re submitte	d for filing.
Please	return all co	rrespondence con	cerning this matter	to the fo	llowing	:	
			David Bailey, T	own M	anager	•	
	•		Name of Cor	ntact Pers	on		
			Seaside Town		il, Inc.		
			Firm/Co	mpany			
			P. O. Bo				
			Add	ress			
			Santa Rosa Be	ach, FL	32459)	
			City/State an	ıd Zip Co	ode		
		da	vid@seasideto	wncour	ncil.cor	n	
	_		(to be used for fi				ation)
For fu	ther informa	ition concerning th	nis matter, please c	all:			
•		David Bailey		ot (850	`	231-1551
	. Nar	ne of Contact Pers	son	_ at (ea Code	& Daytime	231-1551 e Telephone Number
Enclos	ed is a \$35.0	0 check made pay	able to the Depart	ment of S	State.		
		P.O. Box 6	t Section Corporations		Amen Divisi Clifto 2661	Address: dment Sect on of Corp n Building Executive that	center Circle

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes ange is submitted for a corporation organized under the laws of the State of Floridate to change its registered office or registered agent, or both, in the State of Florida.	<u>a</u>
	the corporation: Pensacola Street Neighborhood Association, I	
	l office address: 25 Central Square, H-2 sa Beach, FL 32459	
	address (if different): PO BOX 4957 SANTA ROSA BEACH FL 32459 L	JS
4. Date of incorp	rporation/qualification: 05-26-1987 Document number: N2	0829
	d street address of the current registered agent and registered office on file with the urtment of State: (If resigned, enter resigned)	
	RAYMOND F. NEWMAN, JR.	
	348 MIRACLE STRIP PARKWAY SW PARADISE VILLAGE	
	FORT WALTON BEACH FL 32548 US	. تتبسدر الاستان
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	No.
	MICHELLE ANCHORS	E T
	4460 LEGENDARY DRIVE, SUITE 190	May 2
	P.O. Box NOT acceptable DESTIN, FL 32541	SE I
The street addre	ress of its registered office and the street address of the business office of its regis l be identical.	tered agent,
Such change was authorized by the	vas authorized by resolution duly adopted by its board of directors or by an office the board, or the corporation has been notified in writing of the change.	r so
Jose II	Most Jose R Mestre Assidan	4
()	t 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 pand I am familiar with and accept the obligation of my position as registered agenting filed merely to reflect a change in the registered office address, I hereby confiss been notified in writing of this change.	performance t. Or, if this irm that the
Michigan	My Manual October 8, 2010 gnature of Registered Agent Date	
If signing on be	ehalf of an entity:	
Michell	le Anchors Typed or Printed Name	

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