N24871

(Re	equestor's Name))		
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phor	ne #)		
PICK-UP	WAIT	MAIL		
(Bu	usiness Entity Na	me)		
(Document Number)				
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SECRETABY OF STATE

R-A. Chong C.COULLIETTE

JUL 0 2 2009

EXAMINER

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: INDIG	O UNIT #6 OWNER	S ASSOCIATIO	N, INC	
	Name of 0	Corporation		
DOCUMENT NUMBER	: <u></u>	N24871		
The enclosed Statement of	Change of Registered Offic	ce/Agent and fee are si	ubmitted for filing.	
Please return all correspon	dence concerning this matte	er to the following:		
	BARBARA P CAMERON			
	Name of Co	ontact Person		
	Firm/C	Company		
	213 PLEASAN	VALLEY DRIVE		
		dress		
	DAYTONA BE	ACH, FL 32114		
	City/State a	and Zip Code		
	BPCAM213@BE	LLSOUTH.NET		
E-mai	l address: (to be used for	future annual report	notification)	
For further information co	ncerning this matter, please	call:		
For further information co	incerning this matter, prease	Cair.		
	P CAMERON	at (386)	258-1985 Daytime Telephone Number	
Name of C	ontact Person	Area Code & I	Daytime Telephone Number	
Enclosed is a \$35.00 check	k made payable to the Depa	rtment of State.		
78. 0	Tailing Address:	Stance Add	l modu.	
<u>N</u> A	Iniling Address: mendment Section	Amendme	<u>lress:</u> ent Section	
D	ivision of Corporations	Division of	of Corporations	
	.O. Box 6327	Clifton B	_	
Т	allahassee, FL 32314	2661 Exe	cutive 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 o	7.0502, 607.1508, or 617.1508, Florid organized under the laws of the State o egistered agent, or both, in the State o	f FLORIDA
	-	#6 OWNERS ASSOCIAT	ION, INC
	office address: 213 PLEASANT BEACH, FL 32114	VALLEY DRIVE	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification:	Document number:	N24871
	I street address of the current registe tment of State: (If resigned, enter re	red agent and registered office on file signed)	with the
	RESIGNED - Michele	Barkin	
	1190 Pelican	Bay Dr	
	Daytona Ber	ach Fl 32119	— SEC
6. The name and (if changed):	I street address of the new registered	l agent (if changed) and /or registered of	JUN 29 ARETARN AHASSE
	BARBARA P CAMERON		- F. P.
	213 PLEASANT VALLEY D	RIVE ox NOT acceptable	STA STA
	DAYTONA BEACH, FL 321	114	DE SI
The street address changed will	ess of its registered office and the s be identical.	street address of the business office o	f its registered agent
Such change wa authorized by the	as authorized by resolution duly ad ne board, or the corporation has be	lopted by its board of directors or by en notified in writing of the change.	an officer so
Ho al	te of an officer of director	WILLIAM TALIAFI Printed or typed name an	ERRO, PD
	,	ent and agree to act in this capacity. Il statutes relative to the proper and a se obligation of my position as registe in the registered office address, I he ange.	complete performand ered agent. Or, if the ereby confirm that th
900	muon	JUNE 25, 2	009
•	nature of Registered Agent	Date	
Ť	yped or Printed Name		

* * * FILING FEE: \$35.00 * * *
KS PAYABLE TO FLORIDA DEPARTMENT OF STA