N33785

Holiday Shores Estates

Honcowness, Assoc., Inc.
P.O.Box 794

Destin, Fl 32541

900004507219--7 -07/30701--01039--006 *****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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(Corporation Name)	(Document #)	
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Photocopy Certific	ed Copy eate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/D Change of Registered Agent Dissolution/Withdrawal Merger	irector
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICAT Foreign Limited Partnership Reinstatement Trademark Other	<u></u>

CR2E031(7/97)

Examiner's Initials

T BROWN AUG 2 1 2001



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 6, 2001

HOLIDAY SHORES ESTATES HOMEOWNERS, ASSOC., INC. P.O. BOX 794 DESTIN, FL 32541

SUBJECT: HOLIDAY SHORES ESTATES HOMEOWNERS, ASSOC., INC.

Ref. Number: W01000018048

We have received your document for HOLIDAY SHORES ESTATES HOMEOWNERS, ASSOC., INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We can find no record of the entity named in your document. A computer printout of a similar named entity is enclosed for your review. If this is the right name, please correct your document and return it for filing.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Letter Number: 101A00045046

Teresa Brown Corporate Specialist

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,
the undersigned corporation organized under the laws of the State of Flory dA
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Hali day Shares 1=5+ stes Harres
Association, Inc.
2. The mailing address of the corporation: P. D. Box 794
Dectro Fl 32541
3. Date of incorporation/qualification: Aug 16, 1989 Document number: N33785
4. The name and address of the current registered agent and office:
30 South Shore Drive
Destin P2 32550
5. The name and address of the new registered agent (if changed) and/or registered office (if change):
(P. O. Box Not Acceptable)
James J. Foster
10221 Emeral Crast Parkway, Site 22
Destin, FZ 32550
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.
(Signature of an officer, chairman or vice chairman of the board)
Lant and track to
JAnet Snaw Speretary Treasurer (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
-1- 1. fost
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

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