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T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Tangerine Bay Club Association, Inc.

Name of Corporation

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:

Chad M. McClenathen, Esq.

Name of Contact Person

Chad M. McClenathen, P.A.

Firm/Company

783 S. Orange Avenue, Suite 210

Sarasota, FL 34236-4702

City/State and Zip Code

chad@mcclenathenlaw.com

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

For further information concerning this matter, please call:

Chad M. McClenathen, Esq at 941 552-1088

Name of Contact Person 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 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	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida inge is submitted for a corporation organized under the laws of the State of	Florida	this	_
	r to change its registered office or registered agent, or both, in the State of	Florida.		
1. The name of	the corporation: Tangerine Bay Club Association, Inc.			
	office address: c/o Lighthouse Property Management, 4134 G Key, FL 34228	ulf of N	lexico	Drive
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 04/18/1990 Document number: N376	98		
	d street address of the current registered agent and registered office on file writment of State: (If resigned, enter resigned)	vith the		
	Chad McClenathen, Esq.	_		
	1820 Ringling Boulevard	_		
	Sarasota, FL 34236	_	ಪ	SIAIR
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered o	ffice	3 AUG 28	UNETAR ION OF C
	Chad McClenathen, Esq.	_	HA	사 등 기
	783 S. Orange Avenue, Suite #210	_	3: E	STAI
	P.O. Box NOT acceptable Sarasota, FL 34236-4702		5	2
	ess of its registered office and the street address of the business office of it be identical. as authorized by resolution duly adopted by its board of directors or by an he board, or the corporation has been notified in writing of the change.			ent,
Signati	ure of an officer or director Printed or typed name and to	itle		_
I hereby accept I further agree performance of agent. Or, if th hereby confirm	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 col f my duties, and I am familiar with and accept the obligation of my position his document is being filed merely to reflect a change in the registered office that the corporation has been notified in writing of this change.	mplete on as reg ice addre	istered ss, I	
	STZK/3			
Sig	gnature of Registered Agent Date			
If signing on be	ehalf of an entity:			
	Typed or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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