## N94000002688

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06/13/08--01015--017 \*\*35.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: O. B. C. Homeowycas Association Inc. (Name of Corporation)
DOCUMENT NUMBER: N 94 0000 0 26 88
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:
(Name of Contact Person)
Patliff Management Services Inc. (Firm/Company)
700 S.E. 2 nd Asc. \$415 (Address)
Deedfield Deach FL 13441 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 421-3056 (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

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 <u>Florida</u> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: O. B. C. Homeowners Association, The
1. The name of the corporation: O. B. C. Homeowners Association, The  2. The principal office address: 700 S.E. 2nd Ase. #415  Deception Feach FL 33441
3. The mailing address (if different):
4. Date of incorporation/qualification: 5/25/44 Document number: N94000003688
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Errest W. Willis
500 N.E. Sparish River Alva. #18
BOCA RATON FL 23431
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
CARY C. NATION
100 S.E. 2 Ase. #415
CARY L. RATION  TOD S.E. 2nd Ase. #415  (P.O. Box NOT acceptable)  Decofice a Seach FL 31441
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 poard, or the corporation has been notified in writing of the change.
Alex Eastman Penglant
(Signature of the officer of director) (17thicd 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.
(Signature of Registred Agent)  (Signature of Registred Agent)  (Date)
(Mignature of Registered Agent)
If signing on behalf of an entity:
(Typed or Printed Name)

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