

N94000 002 902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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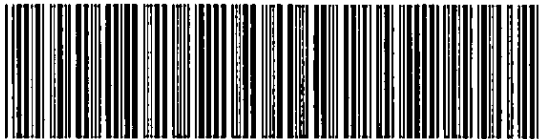
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Southbay Homeowners Association of Escambia County, Inc
Name of Corporation

DOCUMENT NUMBER: N94000002902

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:

Mikel Williams

Name of Contact Person

Firm/Company

2203 Blue Lake Drive

Address

Pensacola, FL 32506

City/State and Zip Code

mikelloren@cox.net

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

For further information concerning this matter, please call:

Mikel Williams

Name of Contact Person

at (850) 712-2348

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

19 OCT 25 AM 11:55
STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Southbay Homeowners' Association of Escambia County, Inc.
2. The principal office address: 2203 Blue Lake Drive, Pensacola, FL 32506
3. The mailing address (if different): P. O. Box 36412, Pensacola, FL 32516
4. Date of incorporation/qualification: June 8, 1994 Document number: N94000002902
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Resigned

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Mikel Williams

2203 Blue Lake Drive

P.O. Box NOT acceptable

Pensacola, FL 32506

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, or the corporation has been notified in writing of the change.

Signature of an officer or director

Mikel Williams, President

Printed 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 Registered Agent

11/21/19
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

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OFFICE OF THE
ATTORNEY GENERAL
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