## N9500000393

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: FIFTH AUENUE PLAZA CONDO ASSOC. INC.  Name of Corporation
DOCUMENT NUMBER: 531390
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
Name of Contact Person
Firm/Company
1 mile Company
13645 111+6 57 Address
Address
FELSMINE / FC 31948  City/State and Zip Code
, ,
SUNTAMCAPTAIN CYAHODICOM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DAV.D UNDENCL at (772) 532-5949  Name of Contact Person Area Code & Daytime Telephone Number
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  Street Address: Amendment Section

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

CR2E045 (8/05)

## 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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: FIFTLY AUENUE PLAZA CONDOMINIUM ASSOCIA
2. The principal office address: 420 FIFTH AUSWIF T
INDIALANTIC, FL 32903
3. The mailing address (if different): 13645 (11 55
FERLSMONE FL 32948
4. Date of incorporation/qualification: 1/26/1995 Document number: N950000039.
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)
DAVID UNDAMILL
13645 HE ST 420 FIFTH AUS
FELLS MEME, FL SZAUB INDIALANTIC, FL 32903
6. The name and street address of the new registered agent (if changed) and /or registered office of (if changed):  DAULO UND EVILLE  13645 11+57  P.O. Box NOT acceptable
P.O. Box NOT acceptable  FOLSMONE FL 72948  SET 5
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  DAVIO J. UNDAIL 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.
(1) d L hnis 6/13/11
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

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