

N96000001746

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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Harbour Island at Cutter Sound, <sup>ASSOCIATION</sup> ~~HOA~~ Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N96000001746

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:

**Kimberly Pruett**

Name of Contact Person

**Island Bookkeeping**

Firm/Company

**8514 SE Banyan Tree St**

Address

**Hobe Sound, FL 33455**

City/State and Zip Code

**islandbookkeeping@yahoo.com**

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

For further information concerning this matter, please call:

**Kimberly Pruett**

Name of Contact Person

at ( **772** ) **545-2243**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 22, 2012

KIMBERLY PRUETT  
ISLAND BOOKKEEPING  
8514 SE BANYAN TREE ST.  
HOBE SOUND, FL 33455

SUBJECT: HARBOUR ISLAND AT CUTTER SOUND ASSOCIATION, INC.  
Ref. Number: N96000001746

We have received your document for HARBOUR ISLAND AT CUTTER SOUND ASSOCIATION, 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):

The current name of the entity is as referenced above. Please correct your document accordingly. *CORRECTED*

The person designated as registered agent in the document and the person signing as registered agent must be the same. *THIS IS ALREADY CORRECT. THEY ARE THE SAME.*

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 212A00021539

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12 SEP -4 AM 10:53

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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: Harbour Island at Cutter Sound HOA Inc. <sup>ASSOCIATION</sup>
2. The principal office address: 941 SE Central Parkway  
Stuart, FL 34994
3. The mailing address (if different): PO Box 1844  
Hobe Sound, FL 33475
4. Date of incorporation/qualification: 4/1/1996 Document number: N96000001746
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)

SAX, SPENCER M @ SACHS, SAX CAPLAN P.L.

6111 BROKEN SOUND PARKWAY NW SUITE 200

BOCA RATON FL 33487 US

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

W. Scott Turnbull @ Crary Buchanan P.A.

759 SW Federal Highway, Suite 106

P.O. Box NOT acceptable

Stuart, FL 34994

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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.

Ed Sikorski

Signature of an officer or director

Ed Sikorski

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.*

W. Scott Turnbull

Signature of Registered Agent

8/6/12

Date

If signing on behalf of an entity:

Typed or Printed Name

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