7/14/2020

Division of Corporations

Florida Department of State

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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE

THE SUMMIT AT TOPS'L OWNERS ASSOCIATION, INC.

Certificate of Status	0
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JEL 20 2020

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1. The name o	of the corporation: THE SUMMIT	AT TOPS'L OWNERS ASSOCIATION, INC.
2. The princip	al office address: 515 TOPS'L BC	TAT TOPS'L OWNERS ASSOCIATION, INC. TI BLVD MIRAMAR BEACH, FL 32550
3. The mailing	g address (if differem): 9011 HIG	HWAY 98 W MIRAMAR BEACH, FL 32550
4. Date of inc	orporation/qualification: 08/28/19	Document number: N96000004494
5. The name a Florida Dep	and street address of the current re partment of State: (If resigned, en	egistered agent and registered office on file with the ter resigned)
	ROBERTS, JAY	
	348 MIRACLE STRIP PARKV	VAY SUITE 7
	FORT WALTON BEACH, FL	the same
6. The name a	and street address of the new regis	stered agent (if changed) and /or registered office (SO)
	CT Corporation System	
	1200 South Pine Island Road	· m
		P.O. Box NOT acceptable
	Plantation, Florida 33324	
		the street address of the business office of its registered as ly adopted by its board of directors or by an officer so is been notified in writing of the change.
authorized by	the board, or the corporation ha	
- Teller	nuc of an officer of director	Stephanie Boehin, Secretary Printed or typed name and title
I hereby accei	of the appointment as registered e to comply with the provisions of and I am familiar with and face eing filed merely to reflected chi as been notified in priting of thi	agent and agree to act in this capacity, of all stanties relative to the proper and complete perform of the obligation of my position as registered agent. Or, is mge in the registered office address, I hereby confirm that's change.
ennifer Kurz,	Asst Secretary	7.14,2020
	rgissure of Registered Agent behalf of an enligy:	Date

* * * 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 (04/43)