## N96000004739

(Requestor's Name)				
(Address)				
(Ad	dress)	,,		
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DAYTONA BEACH REGENCY ASSOCIATION, INC. (Name of corporation)
DOCUMENT NUMBER: N96000004739
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:
Terry Tarwater
(Name of person)
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:  Terry Tarwater  (Name of person)  Charles Baclet and Associates, Inc.  (Name of firm/company)
(Name of firm/company)
2030 Main Street, Suite 1030 (Address)
Irvine, CA 92614
(City/state and zip code)
For further information concerning this matter, please call:
Paul J. Hagan at ( 800 ) 562-6439 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

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

change is submit		7.0502, 607.1508, or 617.1508, Florida Statutes, der the laws of the State of Florida	this statement of in order
	-	CH REGENCY ASSOCIATION, INC.	
2. The principal	office address: 3865 West Cheyer	nne Ave., North Las Vegas, NV 89032	
3. The mailing a	ddress (if different): SAME		
4. Date of incorp	oration/qualification: September	12, 1996 Document number: N96000004739	
	street address of the current registe tment of State:	ered agent and registered office on file with the	
	CT Corporation System		7 9
	1200 South Pine Island Road		LES T
	Plantation, FL 33324		- PSSS P
6. The name and (if changed):	street address of the new registered	d agent (if changed) and /or registered office	O4 JAN 23 PM 4: 15
	NRAI Services, Inc.		
	526 E. Park Avenue		
	(P.O. Box or pe	rsonal mailbox NOT acceptable)	- ,
	Tallahassee, FL 32301		_
The street addre	ss of its registered office and the sidentical.	street address of the business office of its registe	ered agent, as
Such change wa	s authorized by resolution duly accorporation has been notified in	dopted by its board of directors or by an officer writing of the change.	so authorized by
Pari	Muce	Lori Knohl, Assistant Vice Pre	
NRAI Services by:	the appointment as registered age o comply with the provisions of a familiar with and accept the oblivity to reflect a change in the registering of this change.	(Printed or typed name and the capacity.  Il statutes relative to the proper and complete per gation of my position as registered agent. Or, is the confirm that the confirm tha	
If signing on be	half of an entity:		
Paul J. Hagan	(Typed or Printed Name)	Assistant Secretary (Capacity)	
	,	(c-party)	

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