

N97000000539

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PELICAN BAY OWNERS ASSOCIATION, INC
Name of Corporation

DOCUMENT NUMBER: N94000000539

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:

LEE ANN BORDEN
Name of Contact Person

PELICAN BAY OWNERS ASSOCIATION
Firm/Company

P.O. BOX 6743
Address

MIRAMAR BEACH, FL 32550
City/State and Zip Code

leeannborden@mchsi.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEE ANN BORDEN at (850) 974-8577
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
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

**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: PELICAN BAY OWNERS ASSOCIATION, INC.
2. The principal office address: 98 WIND SPRAY COURT
SANTA ROSA BEACH FL 32459
3. The mailing address (if different): P.O. BOX 6743
MIRAMAR BEACH FL 32550
4. Date of incorporation/qualification: 02/02/1994 Document number: N97000000539
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)
NEWMAN, RAYMOND F JR,
348 MIRACLE STRIP PARKWAY STE 7
FORT WALTON BEACH FL 32548

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

KAREN WARD
WARD & KETCHERSID P.A.
P.O. Box NOT acceptable
1241 AIRPORT ROAD SUITE H
DESTIN FL 32541

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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.

Lee Ann Borden
Signature of an officer or director

LEE ANN BORDEN, 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]
Signature of Registered Agent

12/10/09
Date

If signing on behalf of an entity:

KAREN WARD
Typed or Printed Name

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