## N98000000403

(Re	equestor's Name)	•
(Ad	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		,

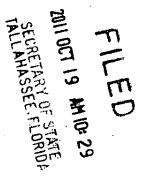
Office Use Only



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10/19/11--01011--002 \*\*35.00



10/20/11

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: VENTANA DUNES PROPER	RTY ASSOCIATION, INC	
Name of C	Corporation	
DOCUMENT NUMBER:	2011-1	
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Don J. S	Schofield	
Name of Co	mact i eison	
	ERTY ASSOCIATION, INC.	
Firm/C	ompany	
PO Box 2033		
Add	iress	
Santa Rosa Beach, FL 32459 City/State and Zip Code		
City/State a	and Zip Code	
djschofield2@gmail.com		
E-mail address: (to be used for	future annual report notification)	
For further information concerning this matter, please	call:	
Don J. Schofield	at ( 850 ) 865-1148	
Name of Contact Person	at ( 850 ) 865-1148 Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Depar	tment of State.	
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Florida
	er to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: VENTANA DUNES PROPERTY ASSOCIATION, INC.
2. The principal	office address 153 Ventana Boulevard
<del></del>	Santa Rosa Beach, FL 32459
3. The mailing a	address (if different): P.O. Box 2033
<del></del>	Santa Rosa Beach, FL 32459
4. Date of incom	poration/qualification: 02/05/1998 Document number: FL 568717 B 1768 P 210
	d street address of the current registered agent and registered office on file with the truent of State: (If resigned, enter resigned)
	Lawrence T. Jehle, Jr. RESIGNED
	161 Ventana Blvd.
	Santa Rosa Beach, FL 32459
6. The name and (if changed):	Lawrence T. Jehle, Jr. RESIGNED  161 Ventana Blvd.  Santa Rosa Beach, FL 32459  I street address of the new registered agent (if changed) and /or registered office  Don J. Schofield, President
	Don J. Schofield, President
	153 Ventana Blvd.
	P.O. Box NOT acceptable
	Santa Rosa Beach, FL 32459
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Signatur	Don J. Schofield, President Printed or typed name and title
-	the dppointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
	09/21/2011
Sign	Date Date
If signing on be	half of an entity:
	Oon J. Schofield  yped or Printed Name
-,	•

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