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| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only

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05/17/18--01006--026 **35.08





COVER LETTER

TO: Amendment Section **Division of Corporations**

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SUBJECT:______Magnolia Park Townhome Owners' Association, INC.

Name of Corporation

DOCUMENT NUMBER: N98000005503

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:

| Jennifer H. Copus | |
|-------------------------|--|
| Name of Contact Person | |
| Copus & Copus, P.A. | |
| Firm/Company | |
| 1184 Eglin Parkway | |
| Address | |
| Shalimar, Florida 32579 | |
| City/State and Zip Code | |
| jennifer@copuslaw.com | |

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

For further information concerning this matter, please call:

Alan Meyers

Name of Contact Person

850 ,259-3741 Area Code & Daytime Telephone Number 850

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

CR2E045 (03/12)

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

1. The name of the corporation: Magnolia Park Townhome Owners' Association, INC.

2. The principal office addr_.....

3. The mailing address (if different):_

6. '

4. Date of incorporation/qualification: 09/23/1998

Document number: N98000005503

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)

| Dan | Dufault | | 18 | |
|------------------------------------|--|---------|----------|----|
| 1160 |) Airport Road | · · · · | HAY | 'n |
| Dest | in, FL 32541 | | 17 | [|
| The name and street a if changed): | address of the new registered agent (if changed) and /or registered office | | AN 11: 3 | Ē |
| Jenn | lifer H. Copus | 0 | <u> </u> | |

1184 Eglin Parkway

P.O. Box: NOT acceptable

Shalimar, FL 32579

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.

Sumature of a officer or duractor

Vice Her

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 negeby confirm that the corporation has been notified in writing of this change.

If signing on behalf of an entity:

Typed or Printed Name

* * * 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 (03/12)