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## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJ	ECT: BAREFOOT'N IN THE KEYS AT OLD TOWN MASTER ASSOCIATION, INC.  Name of Corporation
DOC	UMENT NUMBER: N9900001865
	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Katherine Weigle
	Name of Contact Person
	BAREFOOT'N IN THE KEYS AT OLD TOWN MASTER ASSOCIATION, INC.
	Firm/Company
	9654 N. Kings Hwy, Suite 101
	Address
	Myrtle Beach, SC 29572
	City/State and Zip Code
	krweigle@nhgvacations.com
	E-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
Kath	erine Weigle
	Name of Contact Person at (843 ) 213-2488  Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section  Street Address: Amendment Section
	Division of Corporations Division of Corporations
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

TO:

## 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: BAREFOOT'N IN THE KEYS AT OLD TOWN MASTER ASSOCIATION, INC.
2. The principal office address: 2028 Harrison St. Suite 202, Hollywood, FL 33020
3. The mailing address (if different):
4. Date of incorporation/qualification: 03/19/1999 Document number: N99000001865
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)
E. H. G. Resident Agents, Inc
1141 South Rogers Circle STE 12
Boca Raton, FL 33487
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Registered Agents Inc.
3030 N. Rocky Point Dr. STE 150A
P.O Box NOF acceptable  Tampa FL 33607
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.
Katherine Weigle, Attorney  Printed or typed name and title
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.
Bell Home 7-27-18
Signature of Registered Agent Date
If signing on behalf of an entity:
Bill Havre  Typed or Printed Name

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