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(Re	questor's Name)		_	
· (Ad	dress)		_	
(//-0/	uiessj			
(Address)				
(Cit	y/State/Zip/Phone	· #)	_	
PICK-UP	. WAIT	MAIL		
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(Bu	siness Entity Nam	ie)	_	
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Certified Copies Certificates of Status				
Special Instructions to I	Filing Officer:]	

Office Use Only



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COVER LETTER

CR2E045 (8/05)

TO:	Amendment Section Division of Corporations	
SUBJ		tion Homeowners Association me of Corporation
DOC	UMENT NUMBER:	N99000007198
The e	nclosed Statement of Change of Registers	ed Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning thi	is matter to the following:
	•	<u> </u>
	Kelly G. Helms	stetter / Corporate paralegal
	Nam	stetter / Corporate paralegal se of Contact Person
		owman & Dykes, L.L.P.
		Firm/Company
	4481 Lege	endary Drive, Suite 200
		Address
	Dest	in, Florida 32541 /State and Zip Code
	City	State and Zip Code
	kelfv@eme	raldcoastiawyers.com
		ed for future annual report notification)
For fu	rther information concerning this matter,	nlease call:
	,	F
	Jeffrey Wharton	at (850) 865.8366 Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporati	· · · · · · · · · · · · · · · · · · ·
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 3231	
		Tallahassee, FL 32301

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, th hange is submitted for a corporation organized under the laws of the State of Florida	is
	der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: Cypress Breeze Plantation Homeowners Associa	ation, Inc
2. The principal	al office address: 370 Cypress Breeze Drive, Santa Rosa Beach, Florida 3	2459
3. The mailing a	address (if different):	
<u> </u>		
4. Date of incorp	proration/qualification: 12/07/1999 Document number: N990000)Ž198
	nd street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	MOV 30
	Susan Thompson	C74.
	3520 Thomasville Road, 4th Floor	
	Tallahassee, Florida 32309	ို့ မွ
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered office	
	Conerly, Bowman & Dykes, L.L.P.	
	4481 Legendary Drive, Suite 200	
	P.O. Box NOT acceptable	
	Destin, Florida 32541	
The street addre as changed will	ress of its registered office and the street address of the business office of its registere II be identical.	d agent,
Such change wa authorized by th	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Syriatur	ure of an officer or director Printed or typed name and title	
Thereby accept I further agree to of my duties, and document is bein corporation has	whe appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete perfend I am familiar with and accept the obligation of my position as registered agent. Our ing filed merely to reflect a change in the registered office address, I hereby confirm as been notified in writing of this change.	ormance or, if this that the
Hayn	11/09/11	
	gnature of Registrood Agent Date	_ -
If signing on bel	ehalf of an entity.	
	layward Dykes, Jr. Typod 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 (8/05)