P05000082208

(Re	equestor's Name)	, ,,,,,		
(Ad	dress)			
(Ad	dress)	<u></u>		
(Cit	y/State/Zip/Phone	; #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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1. To obser

COVER LETTER

Division of Corporations				
SUBJECT: Wynnhaven Beach, Inc. (Name of Corp.	poration)			
D0E000083008				
DOCUMENT NUMBER: P05000082208				
The enclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to	the following:			
W. Douglas Harris	***************************************			
(Name of Contact Person)				
Wynnhaven Beach, Inc. (Firm/Company)				
(i iniv com	parry)			
203 Buck Drive				
(Address)				
Fort Walton Beach, FL 32548				
(City/State and Zip Code)				
For further information concerning this matter, please call	l:			
Vicky Flamand	850 × 863-1995			
(Name of Contact Person)	at (850) 863-1995 (Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Departme	ent 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 32301

TO:

Amendment Section

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida State ange is submitted for a corporation organized under the laws of the State of Flor er to change its registered office or registered agent, or both, in the State of Flor	orida	s	-
1. The name of	the corporation: Wynnhaven Beach, Inc.		_	
	l office address: 203 Buck Drive, Fort Walton Beach, FL 32548			
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 06/07/2005 Document number: P0500008	32208		
	d street address of the current registered agent and registered office on file with t rtment of State:	he		
	Harris, W. Douglas			
	184 Eglin Pkwy Suite 9			
	Ft. Walton Beach, FL 32548	TALL.	05 NOV	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	NE FACT	1- NO!	
	Harris, W. Douglas	H.C.	3	
	203 Buck Drive	STAT	9: 22	
	(P.O. Box NOT acceptable) Ft. Walton Beach, FL 32548	→	<i>(</i> \	
	ess of its registered office and the street address of the business office of its related by resolution duly adopted by its board of directors or by an office.		l agent	t ,
authorized by th	as authorized by resolution duly adopted by its board of directors or by an off the board, or the corporation has been notified in writing of the change.	incer so		
	W. Douglas Harris, P (Printed or typed name and title)			
I hereby accept I further agree t of my duties, an document is bei corporation has	t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and completed I am familiar with and accept the obligation of my position as registered aging filed merely to reflect a change in the registered office address, I hereby completed in writing of this change.	ete perfo gent. O confirm	rmanc r, if th that th	e is e
(X)	gnature of Registered Agent) (Date)			
If signing on be	chalf of an entity:			
willia	mbardas Harris Typed or Printed Name)			

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