

PD8000024903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

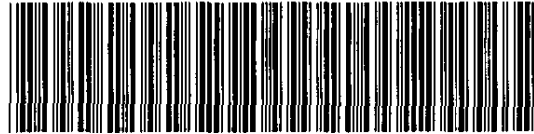
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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64/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sunny Beach Vacation Rentals & Sales, Inc
Name of Corporation

DOCUMENT NUMBER: P08000024903

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:

Tonya Reed

Name of Contact Person

Sunny Beach Vacation Rentals & Sales, Inc.

Firm/Company

1801 Estero Blvd

Address

Ft Myers Beach FL 33931

City/State and Zip Code

info@sunnybeachvacation.com

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

For further information concerning this matter, please call:

Tonya Reed

Name of Contact Person

at (239) 463-9800

Area Code & Daytime Telephone Number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 22, 2012

TONYA REED
SUNNY BEACH VACATION RENTALS & SALES, INC
1801 ESTERO BLVD
FT. MYERS BEACH, FL 33931

SUBJECT: SUNNY BEACH VACATION RENTALS & SALES, INC.
Ref. Number: P08000024903

We have received your document for SUNNY BEACH VACATION RENTALS & SALES, INC.. However, the document has not been filed and is being returned for the following:

The fee to file your document is \$35.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 812A00014878

2012 JUN 12 07
SUNNY BEACH VACATION RENTALS & SALES INC
OPERATING ACCOUNT
P.O. BOX 211
FORT MYERS BEACH, FL 33932
DATE 5-30-12
1481
63-843670
BRANCH 09140
PAY TO THE ORDER OF FLORIDA Dept of STATE \$ 35.00
thirty-five DOLLARS
WACHOVIA
Wachovia Bank, N.A.
wachovia.com
FOR REGISTERED AGENT
MP
001481 067006432 2000028177382

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

**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: Sunny Bach Vacation Rentals & Sales, Inc.
2. The principal office address: 1801 Estero Blvd., Ft Myers Beach FL 33931
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/12/2008 Document number: P08000024903

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)

Petra Dumais

4305 SE 13th Pl

Cape Coral FL 33904

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Tonya Reed

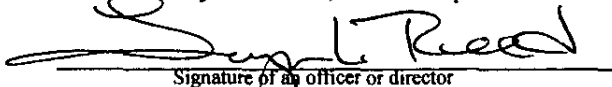
13117 Burningtree Ave

P.O. Box NOT acceptable

Ft Myers FL 33919

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

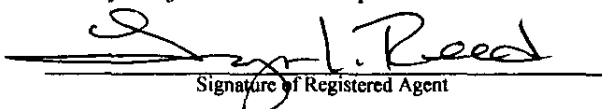
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Tonya L. Reed

Printed or typed name and title

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


Signature of Registered Agent

5-9-12
Date

If signing on behalf of an entity:

Typed or Printed Name

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

FILED
2012 JUN -4 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA