

N36084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

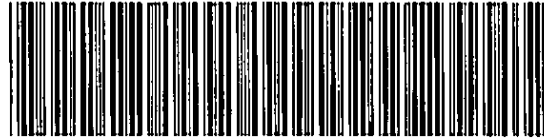
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700329399477

05/28/19--01010--023 **35.00

FILED

2019 MAY 28 PM 12:09

SECRETARIAT OF STATE
TALLAHASSEE, FL

JUN 06 2019

C Kinsey

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sabal Cove Homeowners Assn, Inc.
Name of Corporation

DOCUMENT NUMBER: N36084

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:

David Novak
Name of Contact Person

Longboat Private Services
Firm/Company

595 Bay Isles Rd, Ste 100
Address

Longboat Key, FL 34228
City/State and Zip Code

david@longboatps.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Novak at (941) 228-2903
Name of Contact Person 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

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: Sabal Cove Homeowners Association, Inc.
2. The principal office address: 595 Bay Isles Rd, Ste 100 Longboat Key, FL 34228
3. The mailing address (if different): PO Box 8158 Longboat Key, FL 34228
4. Date of incorporation/qualification: 01/12/1990 Document number: N36084
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)

Advanced Mgmt of Southwest Florida Inc
9031 Town Center Parkway
Bradenton, FL 34202

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

David E Novak
595 Bay Isles Rd, Ste 100
Longboat Key, FL 34228
P.O. Box NOT acceptable

FILED
2019 MAY 28 PM 12:09
SECRETARY OF STATE
TALLAHASSEE, FL

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]
Signature of an officer or director

DAVID S. GUTRIDGE, TREASURER
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]
Signature of Registered Agent

May 18, 2019
Date

If signing on behalf of an entity:
Typed or Printed Name

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