750396

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(Address)
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: GOLFVIEW HOMEOWNERS ASSOCIATION, INC. Name of Corporation
DOCUMENT NUMBER: 750396
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:
ELTON CONANT Name of Contact Person
BUCKEYE ASSOC. MGMT, LLC Firm/Company
Firm/Company
11861 REMSEN RD
Address
JACKSONVILLE, FL. 32223 City/State and Zip Code
City/State and Zip Code
econant @ comcast.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ELTON CONANT at (904) 613 - 8942 Name of Contact Person Area Code & Daytime Telephone Number
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: GOLFVIEW HOMEOWNER'S ASSOCIATION, INC.
2. The principal office address: 4300 PLAZA GATE LANE 5.
JACKSONVILLE, FL. 32217
3. The mailing address (if different): P.D. Box 6000 99
JACKSONVILLE, FL. 32260-0099
4. Date of incorporation/qualification: 12/28/1979 Document number: 750396
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)
(RESIGNED) SIGNATURE REALTY + MANAGEMENT, INC
4003 HARTLEY RD
JACKSONVILLE, FL. 32257
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
BUCKEYE ASSOCIATION MANAGEMENT, LLC
P.O. Box NOT acceptable
JACKSONVILLE, FL. 32223
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 Nonce M. Ellis Printed or typed name and ritle
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.
Elton Concert Signature of Registered Agent Column 1 Date Date Date
If signing on behalf of an entity:
ELTON CONANT Typed 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