

766056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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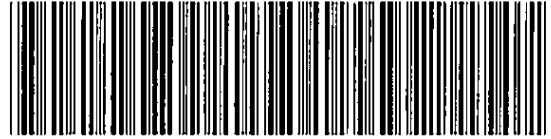
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Forest Ridge Village Condominium Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** 766056

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:

JoAnne McComick

Name of Contact Person

GCAM of Amelia, Inc.

Firm/Company

1880 South 14th Street Suite 103

Address

Fernandina Beach, FL 32034

City/State and Zip Code

joanne@galphincam.com

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

For further information concerning this matter, please call:

JoAnne McComick

at (904-277-659)

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: Forest Ridge Village Condominium Association, Inc.

2. The principal office address: C/O GCAM of Amelia, Inc. 1880 South 14th Street Suite 103, FB, FL 32034

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 12/09/82 Document number: 766056

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)

Lambiase, Nicholas, Jr  
5440 First Coast Highway  
Amelia Island, FL 32034-2347

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

GCAM of Amelia, Inc.  
1880 South 14th Street Suite 103  
P.O. Box NOT acceptable  
Fernandina Beach, FL 32034

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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

Robert Kolich  
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

06/09/2024  
Date

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

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