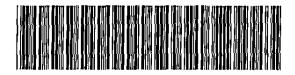
N9300003961

(Requestor	r's Name)
(Address)	
(Address)	
(City/State/	/Zip/Phone #)
PICK-UP	WAIT MAIL
· (Business I	Entity Name)
(Document	Number)
Certified Copies C	Certificates of Status
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COVER LETTER

Division of Corporations
SUBJECT: Spencer's Crossing Homeowner's Assoc. Inc. (Name of Corporation)
DOCUMENT NUMBER: N9300003941
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:
(Name of Contact Person)
Stazac Management, Inc. (Firm/Company)
P.D. BOX 5791) (Address)
Jackson Ville, FL 32241 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (A04) 260-9183 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

by 13/2/3/2

Amendment Section

TO:

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

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: Spencer's Crossing Hemenumers Association Inc	
	<u>`</u>
2. The principal office address: Une San Jose Pl. 148 Jackson ville, FL 32257	_
3. The mailing address (if different): P. D. Box 5791	_
Jacksonville, Fl. 32241	
4. Date of incorporation/qualification: 8127193 Document number: 19300003961	_
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Petric R. Penn	
Dne San Jose Pl. 14E	
Jacksonville, FL. 32257	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Lauren Carr Est	
One San Jose Pl. INE 30 = 0	
(P.O. Box NOT acceptable)	
Jacksonville, Fl. 32257	
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) (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) (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name)	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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