

N19500005262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

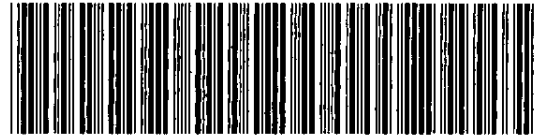
(Business Entity Name)

(Document Number)

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Change
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95-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ASHTON BRIGHTON HOMEOWNERS ASSOC., INC.
(Name of Corporation)

DOCUMENT NUMBER: N95000005262

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:

SHARLEEN THOMPSON
(Name of Contact Person)

RIVER CITY MANAGEMENT SERVICES
(Firm/Company)

PO BOX 50886
(Address)

JACKSONVILLE BEACH, FL 32240
(City/State and Zip Code)

For further information concerning this matter, please call:

SHARLEEN THOMPSON at (904) 725-0080
(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: ASHTON BRIGHTON HOMEOWNERS ASSOC., INC.
2. The principal office address: 7600 ARLINGTON EXPRESSWAY
JACKSONVILLE, FL 32211
3. The mailing address (if different): PO BOX 50886
JACKSONVILLE BEACH, FL 32240
4. Date of incorporation/qualification: 11/03/1995 Document number: N95000005262
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

SIGNATURE REALTY & MANAGEMENT, INC

CTD BRYAN CANTRELL
4003 HARTLEY ROAD

JACKSONVILLE, FL 32257

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

RIVER CITY MANAGEMENT SERVICES

7600 ARLINGTON EXPRESSWAY

(P.O. Box NOT acceptable)

JACKSONVILLE, FL 32211

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.

Carla Beisker
(Signature of an officer or director)

CARLA BEISKER

(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.

Thompson
(Signature of Registered Agent)

AUGUST 23, 2008

(Date)

If signing on behalf of an entity:

SHARLEEN THOMPSON

(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

CR2E045 (8/05)

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