

10500000437/

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

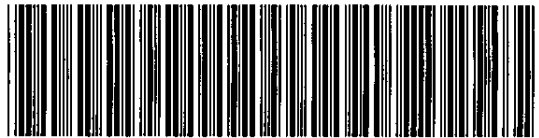
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600109938426

10/01/07--01024--027 **35.00

FILED
07 OCT - 1 PM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA
Changes
82

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LAKE JESUP WOODS Homeowners Assoc., INC.
(Name of Corporation)

DOCUMENT NUMBER: NO5000004371

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:

Mildred Merced
(Name of Contact Person)

Coldwell Banker Commercial NRT
(Firm/Company)

901 N. Lake Destiny Dr. Suite 110
(Address)

Maitland, FL 32751
(City/State and Zip Code)

For further information concerning this matter, please call:

Mildred Merced at (407) 571-5299
(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: LAKE JESUP WOODS HOMEOWNERS' ASSOCIATION, INC.
2. The principal office address: 1105 KENSINGTON PARK DRIVE
ALTAMONTE SPRINGS, FL 32714
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06-14-2005 Document number: NO5000004371

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

BECKETT, WILLIAM A ESQ.
215 NORTH EOLA DRIVE
ORLANDO, FL 32801

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

WEBB, ROBIN
901 North Lake Destiny Dr. #110
(P.O. Box NOT acceptable)
Maitland, FL 32751

FILED
07 OCT - 1 PM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

Robert A Rowlette, Jr VP
(Printed or typed name and title)

I hereby accept the appointment as registered agent and 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 responsibilities of my position as registered agent. Or, if this document is being filed merely to reflect a change of the registered office address, I hereby confirm that the corporation has been notified in writing of the change.

[Signature]
(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

(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