NOICCOTPS

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone #))
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	-

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Acorn Parke Homeowners Association, INC.
Name of Corporation
DOCUMENT NUMBER: NO100007988
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:
James Long
Name of Contact Person
J&L Management of North Florida, INC.
Firm/Company
10592 Balmoral Circle East, Suite# 7
Address
Jacksonville, FL 32218
City/State and Zip Code
james@jlmgmtnfl.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
James Long Name of Contact Person at (904) 683-2569 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: Acorn Parke Homeowners Association, INC.
2. The principal office address: 751 Duval Station Road Jacksonville, FL 32218
3. The mailing address (if different): 1410 Palm Coast Parkway NW Palm Coast, FL 32137
4. Date of incorporation/qualification: 11/09/2001 Document number: N01000007988
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)
Watson Realty Corp.
1410 Palm Coast Parkway NW
Palm Coast, FL 32137
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): James Long/J&L Management of North Florida, INC.
10592 Balmoral Circle East, Suite# 7
P.O. Box NOT acceptable Jacksonville, FL 32218
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 Antione Gary President 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. Signafure of Registered Agent Date
If signing on behalf of an entity:

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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