743840

| (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: |
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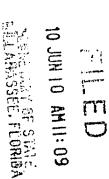
Office Use Only



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LAW OFFICES OF CORNETT, GOOGE & ASSOCIATES, P.A.

JANE L. CORNETT*
HOWARD E. GOOGE*
ROBERT G. RYDZEWSKI JR.
MICHAEL O. DERMODY**

CHARLES W. SINGER OF COUNSEL

LYNN D. SCHWARTZ, CLA MICHELLE GOOGE, FRP

*CERTIFIED CIRCUIT CIVIL MEDIATOR
**ALSO ADMITTED IN NEW JERSEY

June 7, 2010

401 SE OSCEOLA ST. SUITE 101 RIVER OAK CENTER STUART, FLORIDA 34994

MAILING ADDRESS: POST OFFICE BOX 66 STUART, FL 34995-0066

> (772) 286-2990 FAX (772) 286-2996

Secretary of State
Division of Corporations
Department of State
Post Office Box 6327
Tallahassee, Florida 32314

Re: Change of Registered Agent

Dear Sir or Madam:

Enclosed for filing is an original Statement of Change of Registered Agent for Mariner Sands Country Club, Inc., along with a photocopy to be date stamped and returned to me. A postpaid envelope is enclosed for your convenience.

Also enclosed is a \$35 check for your fee.

Thank you for your assistance in this matter and should you have any questions, please do not hesitate to give me a call at 1-772-286-2990, extension 19.

Sincerely,

Lisa A. Arnold, Assistant to Jane L. Cornett, Esquire

/laa Enc.

F:\DATA\COMMON\AMENDMENTS\SECTY.registeredagent wpd.wpd

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of Section 607.0502, 617.0502, 607.1508 or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

The name of the corporation is:

1a.

| Mariner Sands Country Club, Inc. |
|--|
| 1b. Date of Incorporation: |
| August 7 , 1978 ; Document Number |
| 2. The name and address of the current registered agent and office: |
| Bill Ward 6500 SE Mariner Sands Drive Stuart, Florida 34997 |
| 6500 SE Mariner Sands Drive |
| Stuart, Florida 34997 |
| ····································· |
| 3. The name and address of the new registered agent and office (Post Office Box not acceptable): |
| Jane L. Cornett, Esq. |
| Cornett, Googe & Associates, P.A. |
| 401 East Osceola Street |
| Stuart, Florida 34994 |
| The street address of its registered agent 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. |
| Signature Sill NARO, GM/COO Print Name and Title |
| Signature Print Name and Title |
| DATED this 2 day of JUNE, 2010. |
| <u>ACCEPTANCE</u> |

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED · IN THIS CERTIFICATE, 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.

Signature of Registered Agent

Jane L. Cornett, Esq.
Printed Name of Registered Agent

DATED this ____ day of _____