765834

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C. MUSTAIN





COVER LETTER

TO: Amendment Section Division of Corporations Village Green at Baymeadows Property Owners Association, Inc. Name of Corporation 765834 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: Kay Stratton Name of Contact Person Innovative Management Solutions of Jacksonville, Inc. Firm/Company 9838 Old Baymeadows Road-289 Jacksonville, FL 32256 City/State and Zip Code manager@ims-jax.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kay Stratton Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address: Street Address:**

Amendment Section
Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (03/12)

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

statement of chang	ge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes, thi organized under the laws of the State of <mark>Florida</mark> registered agent, or both, in the State of Florida.	s
1. The name of the	corporation: Village Green a	at Baymeadows Property Owners Associ	ation, Inc
2. The principal of	flice address: 9080 Golfside	Drive, Jacksonville, FL 32256-7793	
3. The mailing add	dress (if different): 9838 Old E	Baymeadows Road - 289, Jacksonville, I	FL 32256
4. Date of incorpor	ration/qualification: 11/22/19	Document number: 7658347	
5. The name and s		ered agent and registered office on file with the	2 JUL 9
<u> </u>	Alan Perry		-5
7	786 Blanding Boulevard,	Suite 118	
C	Orange Park, FL 32065		: 04
6. The name and s (if changed):	treet address of the new registere	ed agent (if changed) and /or registered office	
<u>, </u>	Mary Riccio		
g	0080 Golfside Drive		
	P.O.B. Jacksonville, FL 32256-	7793	
The street address as changed will be	s of its registered office and the se identical.	street address of the business office of its registered lopted by its board of directors or by an officer so en notified in writing of the change.	i agent,
(Indiea)	M. L. time corporation has be	Andrea Letizia, Treasurer Printed or typed name and title	
I hereby accept th I further agree to performance of m agent. Or, if this hereby confirm th	e appointment as registered age comply with the provisions of al y duties, and I am familiar with document is being filed merely t at the corporation has been not	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registe to reflect a change in the registered office address, ified in writing of this change.	red I
Mary	Met CW ure of Registered Agent	6/28/12 Date	
If signing on beha			
Mary Riccio			
	ed or Printed Name		

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