

A 27 257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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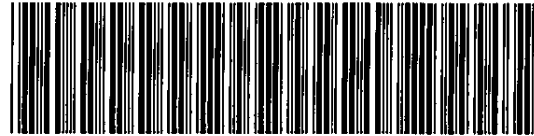
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

7-11
[Signature]

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. BEAUCLERC BAY APARTMENTS LTD
Name of Limited Partnership or Limited Liability Limited Partnership

2. 10-21-88
Date of filing/registration in Florida

3. A27257
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CHARLES SEARS
Name

3616 EMERSON STREET
Address

JACKSONVILLE FL 32207
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

CHARLES SEARS
Name

2011 GIBSON RD
Florida street address (P.O. Box not acceptable)

JACKSONVILLE FL 32207
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature]
Signature of General Partner

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 obligations of my position as registered agent.

[Signature]
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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