

F02000005691

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

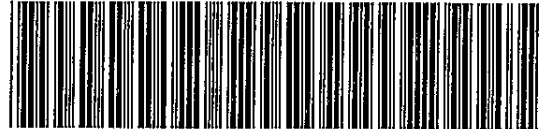
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Susan Whitlatch
Advised that RA
Address is the same
as current RA Address
(10)

Office Use Only

RA change
(10) 10/17/03



800023780188

10/14/03--01062--006 **2395.00

FILED
03 OCT 14 PM 2:55
CLERK OF STATE
TALLAHASSEE, FLORIDA



October 13, 2003

FILED
03 OCT 14 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VIA FEDERAL EXPRESS

Florida Secretary of State
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RE: Change of Registered Agent

To Whom It May Concern:

I have enclosed for filing change of registered agent forms for various entities which are either incorporated or qualified to transact business in the State of Florida along with a check i/a/o \$2,395.00 to cover the cost of these changes.

Upon filing please return a recorded copy to us for our files. If you have any questions please call me at 904-301-4460.

Best Regards,

Susan G. Whitlatch
Paralegal

:sgw

Enclosures

**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
DELAWARE *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: RESIDENTIAL COMMUNITY TITLE COMPANY
2. The principal office address: 245 RIVERSIDE AVENUE SUITE 500, JACKSONVILLE FL 32202
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/22/2002 Document number: F02000005691

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

LAWRENCE PAINE

245 RIVERSIDE AVENUE SUITE 500

JACKSONVILLE FL 32202

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

CHRISTINE M. MARX

(Same AS Above)
(P.O. Box or personal mailbox NOT acceptable)

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.

Mark Lassman
(Signature of an officer, chairman or vice chairman of the board)

MARK D. LASSMAN, Secretary
(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.

Ch M Marx
(Signature of Registered Agent)

9/15/03
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

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

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