

N 000 000 05923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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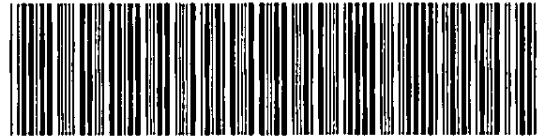
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Grand Cay Villas at Ponte Vedra Shores Condominium Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N00000005923

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:

Lynda Wick

Name of Contact Person

Madison Property Management Solutions, LLC

Firm/Company

6960 Bonneval Road, Suite 302

Address

Jacksonville, FL 32216

City/State and Zip Code

irichardson@madison-solutions.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Irene Richardson

Name of Contact Person

at (904) 641-1858

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 St. Johns FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Grand Cay Villas at Ponte Vedra Condominium Association, Inc.
2. The principal office address: 101 Vera Cruz Drive  
Ponte Vedra Beach, FL 32082
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/07/2000 Document number: N00000005923
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)

Mark Sheme

101 Cruz Drive

Ponte Vedra Beach, FL 32082

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

Madison Property Management Solutions, LLC

6960 Bonneval Road, Suite 302

P.O. Box NOT acceptable

Jacksonville, FL 32216

2020 JAN 23 PM 4:49

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]  
Signature of an officer or director

Tina N. Day Vice 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.*

[Signature]  
Signature of Registered Agent

01/06/2020  
Date

If signing on behalf of an entity:

Kim Balaskiewicz

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (04/13)