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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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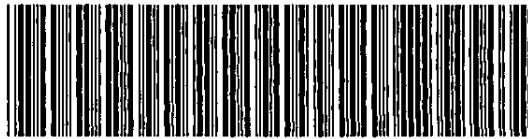
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APR 25 2013  
T. LEMIEUX

A handwritten signature in black ink, appearing to read "T. Lemieux".

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Grand Reserve Condominium Association, Inc  
Name of Corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

Wayne Scheiner

Name of Contact Person

The Grand Reserve Condominium Assoc. Inc

Firm/Company

13810 Sutton Park Drive North (Clubhouse)

Address

Jacksonville FL 32224

City/State and Zip Code

WSCHAINER@TCG.MT.COM

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

For further information concerning this matter, please call:

Wayne Scheiner

Name of Contact Person

at ( 904 ) 223-6089

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

1. The name of the corporation: the Grand Reserve Condominium Assoc. Inc.
2. The principal office address: 13810 Sutton Park Drive, North, (Clubhouse)  
Jacksonville, FL 32224
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 5/24/01 Document number: Book 10012 Page 279

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)

Michael J. McCabe Esq.  
McCabe Law Group PA  
572 Ponte Vedra Boulevard  
Ponte Vedra Beach, FL 32082

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

Christopher M. Cobb  
Jimmons P. & Cobb, P.A.  
751 Riverside Park Drive - suite 302  
P.O. Box NOT acceptable  
Jacksonville, FL 32204

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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.

Robert Jacobs  
Signature of an officer or director

Robert Jacobs 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 of Registered Agent

4-15-2013  
Date

If signing on behalf of an entity:

Christopher M. Cobb  
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 (03/12)