## 101678

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800250169918

800250169918 08/12/13--01024--033 \*\*35.00



AHG 15 2013

## **COVER LETTER**

TO: Amendment Section Division of Corporations

Beauclerc Lakes Condominium Assn
Name of Corporation

DOCUMENT NUMBER, NO1678

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:

**Della Myers** 

Name of Contact Person

Signature Realty & Management

Firm/Company

4003 Hartley Rd

Address

Jacksonville, FI 32257

City/State and Zip Code

dmyers@srmifl.com

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

For further information concerning this matter, please call:

**Della Myers** 

,904

268-0035

Name of Contact Person

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA er to change its registered office or registered agent, or both, in the State of Florida.	
	the corporation: Beauclerc Lakes Condominium Association	
	office address: c/o 4003 Hartley Rd, Jacksonville, Fl 32257	
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: 2/28/1984 Document number: N01678	
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	Terence K. Banning	
	6028 Chester Ave, Suite 105	
	Jacksonville, Fl 32217	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	281.3
	Bryan K. Cantrell	
	c/o 4003 Hartley Rd	[
	P.O. Box NOT acceptable	_
	Jacksonville, FI 32257	-
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, l be identical.	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the comparation has been notified in writing of the change.	
Signatu	re of an officer or director Beth A Holley - President  Printed or typed name and title	
perjormance of agent. Or. if th	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
8 - D-1	mature of Registered Agent Date	
If signing on be	chalf of an entity:  CANTRELL  Voed or Printed Name	

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