

NO 3 0000 10050

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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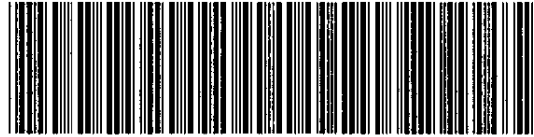
(Business Entity Name)

(Document Number)

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RAChange

08/19/09

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** St. Johns Forest Master Property Owners  
Name of Corporation Association, Inc.

**DOCUMENT NUMBER:** NO3000010050

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:

Alice Hubbard  
Name of Contact Person

First Coast Association management  
Firm/Company

11555 Central Parkway, Suite 801  
Address

JACKSONVILLE, FL 32224  
City/State and Zip Code

alice @ firstcoastam.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alice Hubbard at 904, 998-5365  
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**

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

1. The name of the corporation: St. Johns Forest Master Property Owners Association, Inc.  
2. The principal office address: 11555 Central Parkway, Suite 801, Jacksonville, FL 32224  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: July 1, 09 Document number: NO3000010050  
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)

NRAI Services, Inc.

2731 Executive Park Drive, Suite 4  
Weston, FL 33331

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

First Coast Association management, LLC  
11555 Central Parkway, Suite 801  
Jacksonville, FL 32224  
P.O. Box 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.

Ketika Piazza  
Signature of an officer or director

KETIKA PIAZZA  
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.

Oliver B. Bess  
Signature of Registered Agent

7/21/09  
Date

If signing on behalf of an entity:

First Coast Association management, LLC  
Typed or Printed Name

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