

NO3000 10294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2016 APR 25 A 11:58  
TALLAHASSEE, FLORIDA  
JERRY B. SIMS  
TALLAHASSEE, FLORIDA  
APR 26 2016  
J. LEMIEUX

*Handwritten signature*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Fort George Estates Homeowners Assc., Inc.

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** N03000010294

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:

**Nancy Kulm**

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Firm/Company

**9195 Woodsman Cove Lane**

\_\_\_\_\_  
Address

**Jacksonville, FL 32226**

\_\_\_\_\_  
City/State and Zip Code

**sales@elg.comcastbiz.net**

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

For further information concerning this matter, please call:

**Nancy Kulm**

\_\_\_\_\_  
Name of Contact Person

at ( **904** ) **910-8303**

\_\_\_\_\_  
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: Fort George Estates Homeowners Association, Inc  
2. The principal office address: 9252 Woodsmaan Cove Lane  
Jacksonville, FL 32226  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 11/2003 Document number: N03000010294

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)

Resigned

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

Nancy Kulm


9195 Woodsman Cove Lane

P.O. Box NOT acceptable

Jacksonville, FL 32226

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 of an officer or director

Chris Payne/VP

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

4.14.16

Date

If signing on behalf of an entity:

Nancy Kulm

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