N0400005538

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TIVISION OF CORPORATION

R.A.

JAN 1 1 2013

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

Members Association of Vicar's Landing

Name of Corporation

N04000005538 **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:

Candy Bowling

Name of Contact Person

Life Care Ponte Vedra, Inc.

Firm/Company

1000 Vicar's Landing Way

Address

Ponte Vedra Beach, FL 32082

City/State and Zip Code

cbowling@vicarslanding.com

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

For further information concerning this matter, please call:

Candy Bowling

904 273-1702 rea 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 chang	ge is submitted	tions 607.0502, 617.0502, 6 for a corporation organize gistered office or registered	d under the laws of the Sta	te of Florida	is 	
1. The name of the		• •	ion of Vicar's Landi			
2. The principal of	•	1000 Vicar's Landi				
2. The principal of		Ponte Vedra Beach	, FL 32082			
3. The mailing add	dress (if differe	nt):				
4. Date of incorpo	ration/qualifica	ation: 6/2/2004	Document number: NC)400000553	8	
5. The name and s	treet address of	f the current registered ager (f resigned, enter resigned)				
F	Raymond M	1. Johnson (Resigne	ed)			
	000 Vicar's	s Landing Way			<u>-</u>	i Se
<u></u>	Ponte Vedra	a Beach, FL 32082			3 JAN	NOIS LANCE
6. The name and s (if changed):	treet address of	f the new registered agent (if changed) and /or register	ed office	-9 PH	ARY OF
<u>_</u>	D. Bruce Jo	nes		<u>.</u>	60	ST
_1	1000 Vicar's	s Landing Way			30	TO:
	Ponte Vedr	P.O. Box NOT acc a Beach, FL 32082	eptable			•
		ed office and the street add	lress of the business office	of its registered	i agent,	
Such change was authorized by the	authorized by board or the c	resolution duly adopted by orporation has been notified	its board of directors or bed in writing of the change	y an officer so		
Millian Signature	of an officer or direct	alor .	Printed or typed name	andaille	SOC	·,
I hereby accept th I further agree to performance of m agent. Or, if this hereby confirm th	e appointment comply with th y duties, and I document is be at the corpora	as registered agent and a ne provisions of all statutes am familiar with and acce sing filed merely to reflect tion has been notified in w	gree to act in this capacity relative to the proper and pt the obligation of my po a change in the registered riting of this change.	, i complete sition as registe l office address,	red I	
Signat	ure of Registered Ag	gent	Date			
If signing on beha			,			
Type	ed or Printed Name					

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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