## N04000008807

(Re	equestor's Name)		
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PICK-UP	☐ WAIT	MAIL	
(Bı	usiness Entity Nan	ne)	
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(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to	Filina Officer:		
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T. CARTER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Lake Ridge Villas North at Flo	eming Island Plantation Condominium Association, Inc.
Name of	f <del>Limited Liability Company</del> Corporation
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please return all correspondence concernin	g this matter to the following:
Margo T. Valenti, FRP	
Community Association Ser	vices, LLC
301 W. Platt St. #408	
Tampa, Florida 33606  City/State and Zip Code	
mvalenti@communityassociation  E-mail address: (to be used for future annual report	·
For further information concerning this ma	tter, please call:
Margo T. Valenti FRP	<sub>at (</sub> 813 ) 321-2799
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	ing amount:
□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

## 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.

	he corporation: <u>LAKE RIDGE VILLAS NORTH AT FLEMING ISLAND</u> IUM ASSOCIATION, INC.	PLANTATION	-
2. The principal	office address: 1008 Park Avenue, Orange Park, FL 32073		·
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 09/13/2004 Document number: N0400000	08807	
	street address of the current registered agent and registered office on file with tment of State: (If resigned, enter resigned)	ı the	
	Linda M. Woods		
	1008 Park Avenue		
	Orange Park, FL 32073	13 DEC	Ä. Ees
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office		
<del>-</del> .	Community Association Services, LLC		
	301 W. Platt Street, #408	3: 00	STATE
	P.O. Box NOT acceptable		) ``
	Tampa, Florida 33606		
The street addre as changed will	ss of its registered office and the street address of the business office of its be identical.	registered agent,	
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an of board, of the corporation has been notified in writing of the change.	ficer so	
din	JOHN HERZBERG, PRESIDENT		
	e of an ottoer endureeter Printed or typed name and title		
I further agree t performance of	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and comp my duties, and I am familiar with and accept the obligation of my position of s document is being filed merely to reflect a change in the registered office that the corporation has been notified in writing of this change.	as registered	
1//	11/08/2013		
V	atupe of Registered Agent / Date		
If signing on bel	nalf of an entity:		
	TAYLOR, PRESIDENT		
Tv	ned or Printed Name		

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