

N05000007026

Florida Department of State
Division of Corporations
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Division of Corporations
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**REGISTERED AGENT CHANGE
TAPESTRY PARK JACKSONVILLE PROPERTY OWNERS
ASSOCIATI**

Certificate of Status	0
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AUG - 8 2012

T. BROWN

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: TAPESTRY PARK JACKSONVILLE PROPERTY OWNERS ASSOCIATION, INC.

2. The principal office address: C/O PAIGE SPORTS ENTERTAINMENT
302 CAMPUSVIEW DRIVE, SUITE 108 COLUMBIA MO 65201

3. The mailing address (if different):

4. Date of incorporation/qualification: 07/06/2005 Document number: N0500007026

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)

CANTRELL & MORGAN, INC.

200 W. PORSYTH ST. SUITE 400

JACKSONVILLE FL 32202 US

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

CT CORPORATION SYSTEM

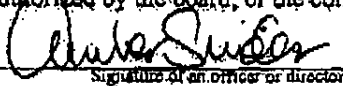
1200 SOUTH PINE ISLAND ROAD

P.O. Box NOT acceptable

PLANTATION, FLORIDA 33324

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

Amber Snider, Vice President

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.

CT Corporation System

By: 
Signature of Registered Agent

8/8/2012
Date

If signing on behalf of an entity:

Connie Bryan

Typed or Printed Name

Assistant Secretary

FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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