N05000009616

(Re	equestor's Name)	
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(Cit	y/State/Zip/Phone	· #)
PICK-UP		MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: The River watch at City Centre Commercial Condominium Association, Inc
DOCUMENT NUMBER: N0500009616
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:
Mary G. Morcom
Name of Contact Person
Law Offices of C. Guy Bond, P.A.
Firm/Company
11512 Lake Mead Avenue, Suite 303
Address
Jacksonville, FL 32256 City/State and Zip Code
aleopard@riverwtch.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Andrew T. Leopard at (904) 632-2433 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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this uge is submitted for a corporation organized under the laws of the State of Florida	
	r to change its registered office or registered agent, or both, in the State of Florida.	£#
 The name of the The principal control 	the corporation: The Riverwatch at City Centre Commercial Condominium A office address: 76 SOUTH LAURA STREET, SUITE 301, JACKSONVILLE,	19200
FLORIDA 3	32202	
3. The mailing ad	ddress (if different):	
4. Date of incorp	poration/qualification: 09/16/2005 Document number: N05000009616	
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)	
-	tment of State: (If resigned, enter resigned) CT CORPORATION SYSTEM ATTN: RHIANNON LAWLER	789
	1200 SOUTH PINE ISLAND ROAD	FF CFF
_	PLANTATION FL 33324	
5. The name and : (if changed):	Street address of the new registered agent (if changed) and /or registered office	
	ANDREW T. LEOPARD	
	76 SOUTH LAURA STREET, SUITE 301	
-	P.O. Box NOT acceptable	
3	JACKSONVILLE, FLORIDA 32202	
The street address changed will b	ss of its registered office and the street address of the business office of its registered agent, be identical.	
Such change was nuthorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.	
Signature	Andrew T. Leopard, President Printed or typed name and title	
hereby accept the further agree to further agree to further agree to further and locument is being corporation has been seen as the further further the further further the further fu	the appointment as registered agent and agree to act in this capacity. It is complete performance to comply with the provisions of all statutes relative to the proper and complete performance of an familiar with and accept the obligation of my position as registered agent. Or, if this by filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	?
/il	24 November 2009	
`	ature of Registered Agent Date	
f signing on beha	nall of an entity:	
Typ	ped 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

CR2E045 (8/05)