N06000003853

(R	Requestor's Name)			
(A	ddress)			
(A	ddress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
8)	lusiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of S	Status		
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12/20/24--01019--009 **35.00

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FEB 04 = S. PRATHER

COVER LETTER

Name of Contact Person	at (904)277-6597 Area Code & Daytime Telephone Number
JoAnne McCormick	at (904)277-6597 Area Code & Daytime Telephone Number
For further information concerning this matter, please cal	II:
E-mail address: (to be used for future annual report i	notification)
joanne@galphincam.com	
City/State and Zip Code	
Fernandina Beach, FL 32034	
Address	·····
1880 South 14th Street, Suite 103	
Firm/Company	
GCAM of Amelia, Inc.	
Name of Contact Person	
JoAnne McConnick	
Please return all correspondence concerning this matter t	o the following:
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
DOCUMENT NUMBER: N06000003853	
Name of Corporation	
SUBJECT: Amelia River Walk Association, Inc.	
Division of Corporations	
TO: Amendment Section	

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation	617.0302, 607.1508, or 617.1508, Florida Statu On organized under the laws of the State of <u>Florid</u>	la	
	er to change its registered office of the corporation: Amelia River Wa	or registered agent, or both, in the State of Floria alk Association, Inc.	la.	
		treet, Suite 103, Fernandina Beach, FL 32034		
_	address (if different):			
4. Date of incor	poration/qualification: 4/6/2006	Document number: N06000003853		
	d street address of the current regi ertment of State: (If resigned, enter	istered agent and registered office on file with the resigned)	B 	262
	RESIGNED- Property Advisors I	Management	· .	4 (Hr.
	12724 Gran Bay Parkway W, Suit	e 410	1~	2024 BEC 20
	Jacksonville, FL 32258) 5:1 5:
6. The name an (if changed):	d street address of the new registe	red agent (if changed) and /or registered office	; ;	ئ ئ
	GCAM of Amelia, Inc.			
	1880 South 14th Street, Suite 103			
		P.O. Box NOT acceptable		
	Fernandina Beach, FL 32034			
The street addrass changed will	ess of its registered office and the identical.	e street address of the business office of its regi	istered a	agent,
Such change wanthorized by t	as authorized by resolution duly he board, or the corporation has l	adopted by its board of directors or by an office been notified in writing of the change.	er so	
Stacy A Manning		Stacey Manning, President		
Signate	ire of an officer of director	Printed or typed name and title	,	
I hereby accept I further agree of my duties, an document is be corporation ha	the appointment as registered a to comply with the provisions of and I am familiar with and accepting filed merely to reflect a change heen notified in writing of this contact.	gent and agree to act in this capacity. all statutes relative to the proper and complete the obligation of my position as registered age ge in the registered office address, I hereby con change.	perform nt. Or ofirm th	mance if this at the
Albert	l'a	12/17/2024		
	mature of Registered Agent chalf of an entity:	Date		-
JoAnne McCorn				
T	yped or Printed Name	_		

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