

N06 0000084 33

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900134942339

08/28/08--01015--022 **35.00

RECEIVED
FBI LABORATORY
FBI LABORATORY

08 AUG 28 PM 1:51

FILED

RA Chang
9/5/08
De

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WATERSEdge @ HARBOR TOWN HOA, INC
(Name of Corporation)

DOCUMENT NUMBER: NO6000008433

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:

ANNA M MARKS
(Name of Contact Person)

MAY MGMT SERVICES INC
(Firm/Company)

5455 AIA SOUTH
(Address)

ST AUGUSTINE FL 32080
(City/State and Zip Code)

For further information concerning this matter, please call:

CYD GREENHALGH at (904) 584-1063
(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

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 FL
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: WATERSEGE AT HARBORTOWN Homeowners
2. The principal office address: 10036 SAWGRASS DR WEST #1 Association,
PONTE VEDRA BCH, FL 32082 Inc.
3. The mailing address (if different): 5455 AIA SOUTH
ST AUGUSTINE FL 32080
4. Date of incorporation/qualification: 08/09/06 Document number: N 060 0000 8433
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

CHRITTON J KIRBY ESQ
1301 RIVER PLACE BLVD S
JACKSONVILLE FL 32200

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

ANNA M MARKS
% MAY MGMT SERV, INC
(P.O. Box NOT acceptable)
5455 AIA SOUTH, ST AUGUSTINE, FL 32080

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]
(Signature of an officer or director)

SCOTT Fjelstad
(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.

[Signature]
(Signature of Registered Agent)

8/25/08
(Date)

If signing on behalf of an entity:

ANNA M MARKS, PRES MAY MANAGEMENT SERVICES, INC.
(Typed or Printed Name)

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