# N06000010920

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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 28, 2016

BRYAN CANTRELL SIGNATURE REALTY & MANAGEMENT 4003 HARTLEY RD JACKSONVILLE, FL 32257

SUBJECT: JENNINGS POINT CONDOMINIUM ASSOCIATION, INC.

Ref. Number: N06000010920

We have received your document for JENNINGS POINT CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 916A00013633

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Shelby.

#### **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Jennings Point Condominiums Inc

Name of Corporation

DOCUMENT NUMBER, NO6000010920

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:

### **Bryan Cantrell**

Name of Contact Person

## Signature Realty & Management

Firm/Company

4003 Hartley Rd

Address

Jacksonville, FL 32257

City/State and Zip Code

info@srmifl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shelby Redburn

;904

940-9882

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Jennings Point Condominiums
2. The principal office address: 4003 Harley Rd, Jacksonville FI 32257
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/18/2006 Document number: N06000010920
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)  OMMUNITY MANGEMENT ONCE PLS OF JACKSON VIIIP  TACKSON VIIIP, FL 32256
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Signature Realty and Management  4003 Hartley Rd  P.O. Box NOT acceptable  Jacksonville, FL 32257
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  MIChael Onthe Prints Prints  Printed or typed name and title
I herehy 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 of Registered Agent Date
If signing on behalf of an entity:
Bryan Cantrell
Typed or Printed Name

Make checks payable to Florida Department of State Mail To: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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