

N06712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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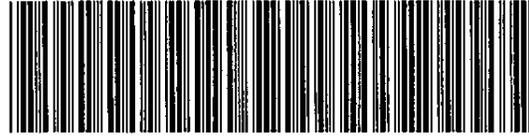
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

JUL 14 2014  
C. CARROTHERS

\*  
**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Waterford Condominium Association of Jacksonville, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N06712

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:

**Irene Richardson**

Name of Contact Person

**Madison Property Management Solutions, LLC**

Firm/Company

**6960 Bonneval Road, Suite 302**

Address

**Jacksonville, FL 32216**

City/State and Zip Code

**irichardson@madison-solutions.net**

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

For further information concerning this matter, please call:

**Irene Richardson**

Name of Contact Person

at ( **904** ) **641-1858**

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: The Waterford Condominium Association of Jacksonville, Inc.

2. The principal office address: 6960 Bonneval Road, Suite 302, Jacksonville, FL 32216

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 12/18/1984 Document number: N06712

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)

RESIGNED: Banning Management

6028 Chester Avenue, Suite 105

Jacksonville, FL 32217

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

Madison Property Management Solutions, LLC

6960 Bonneval Road, Suite 302

P.O. Box NOT acceptable

Jacksonville, FL 32216

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.

Jamie Woodward  
Signature of an officer or director

Jamie Woodward Pres  
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.*

Kim Bz  
Signature of Registered Agent

6/6/15  
Date

If signing on behalf of an entity:

Kim Balaskiewicz  
Typed 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 (03/12)

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2015 JUL -8 AM 10: 9  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA