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TO: Amendment Section **Division of Corporations** St. James Crossing Homeowners Association, Inc. Name of Corporation N07000006201 DOCUMENT NUMBER: 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: Christopher A. Desrochers Name of Contact Person Christopher A. Desrochers, P.L. Firm/Company 2504 Ave G NW Address Winter Haven, FL 33880 City/State and Zip Code CADlawfirm@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Christopher Desrochers Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (03/12)

P.O. Box 6327

Tallahassee, FL 32314

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

statement of cha	nge is submitted	ctions 607.0502, 617.050 I for a corporation organ evistered office or revist	iized under the laws	of the State of FL	ORIDA	
1. The name of the corporation: 2. The principal office address:		St. James Crossing Homeowners Association, Inc. 2504 Ave G NW				
		Winter Haven, FL 33880				
3. The mailing a	ddress (if differ	_{ent):} Same				
4. Date of incorp	oration/qualific	ation: 6/21/2007	Document nu	mber: N070000)06201	
5. The name and	l street address o	of the current registered a If resigned, enter resigne		office on file with t	he	
	Denise E. Abercrombie					
	3020 S Florida Ave Suite 305					
	Lakeland, l	FL 33803 US			2019	
6. The name and (if changed):	l street address o	of the new registered age	nt (if changed) and	or registered office	816102	
	Christophe	r A. Desrochers,	P.L.		P	
	2504 Ave G NW == ==					
	Winter Hav	P.O. Box NOT en, FL 33880	acceptable		0	
The street addre	ess of its register be identical.	red office and the street	address of the busi	ness office of its re	gistered agent,	
Such change wa authorized by th	s authorized by the board, or the	resolution duly adopted corporation has been no	by its board of dir tified in writing of	ectors or by an offi- the change.	cer so	
Laler	re of an officer or dire	10ml0001		mpson, Presid	ent	
I further agrêe t performance of avent. Or, if thi	o comply with to my duties, and i s document is b	t as registered agent am he provisions of all statt am familiar with and a eing filed merely to refl ation has been notified in	ites relative to the p ccept the obligation ect a change in the	proper and comple n of my position as revisiered office ac	registered	
Sign	nature of Registered A	gent		Sp. / 19	-	
If signing on bel	•	•	/	7		
Christopher	•					

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