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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Deerwood Place V Condominium Association, Inc.

Name of Corporation

DOCUMENT NUMBER, NO7000010321

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:

Kim Balaskiewicz

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

kim@madison-solutions.net

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

For further information concerning this matter, please call:

Irene Richardson

,,904 、6

641-1858

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	the corporation: Deerwood Place V Condominium Association, Inc.
	office address: 4480 Deerwood Lake Parkway, Jacksonville, FL 32216
	ddress (if different): C/o Madison Property Management Solutions
	nneval Road Suite 302, Jacksonville, FL 32216
4. Date of incorp	oration/qualification: 10/22/2007 Document number: N07000010321
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	RESIGNED
•	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Madison Property Management Solutions, LLC
	6960 Bonneval Road Suite 302
	P.O. Box NOT acceptable
	Jacksonville, FL 32216
The street address changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
James	James J. Gensch, President Printed or typed name and title
I hereby accept to I further agree to performance of the agent. Or, if this	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered s document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Kim	ature of Registered Agent Date
If signing on beh	nalf of an entity:
Kim BALA	ped or Printed Name

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