

N34708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

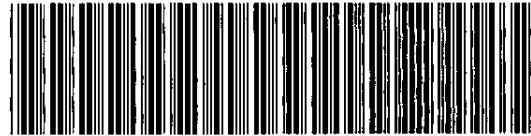
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000213507490

10/27/11--01004--014 \*\*35.00

PA Ro hy

FILED  
11 NOV -3 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11-3-11



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 27, 2011

WILLIAM JUNGERS  
SPRUCE CREEK RESIDENTS ASSOCIATION, INC.  
6483 SW 110TH ST  
OCALA, FL 34476

SUBJECT: SPRUCE CREEK RESIDENTS ASSOCIATION, INC.  
Ref. Number: N34708

We have received your document for SPRUCE CREEK RESIDENTS 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):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 411A00024565

RECEIVED  
11 NOV -3 AM 11:16  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Spruce Creek Residents Association, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N34708

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:

William Jungers  
Name of Contact Person

Spruce Creek Residents Association, Inc.  
Firm/Company

6483 SW 110th Street  
Address

Ocala, FL 34476  
City/State and Zip Code

bjungers@earthlink.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Jungers at ( 352 ) 291-4803  
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: Spruce Creek Residents Association, Inc.
2. The principal office address: 11040 SW 64th Ave. Ocala, FL 34476 US
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/17/1989 Document number: N34708

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 ROGER N. FISHER  
6370 SW 111th PLACE  
OCALA, FL 34476

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

William Jungers  
6483 SW 110th St.  
Ocala, FL 34476

P.O. Box NOT acceptable

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

Normand Simard, President  
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

October 24, 2011  
Date

If signing on behalf of an entity:

William Jungers  
Typed or Printed Name

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

FILED  
11 NOV -3 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA