N38749

(Requestor's Name)				
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(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Jefferson Corners at Heritage Ridge Homeowners Ass Name of Corporation			
DOCUMENT NUMBER: N38749			
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:			
<u> </u>			
Deborah Ross, Esquire			
Name of Contact Person			
Ross Earle & Bonan, P.A. Firm/Company			
Firm/Company			
789 S Federal Highway, Suite 101			
Address			
Stuart, FL 34995 City/State and Zip Code			
·			
E-mail address: (to be used for future annual report notification)			
E-mail address: (to be used for future annual report notification)			
•			
For further information concerning this matter, please call:			
Deborah Ross _{at (} 772) 287-1745			
Deborah Ross at (772) 287-1745 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 cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Singe is submitted for a corporation organized under the laws of the State of \underline{F} or to change its registered office or registered agent, or both, in the State of Fl	lorida
1. The name of t	the corporation: Jefferson Corners at Heritage Ridge Home	eowners Associa
2. The principal	office address: 2074 W Indiantown Road, #200	
Jupiter, FL		· · · · · · · · · · · · · · · · · · ·
_	ddress (if different): The Continental Group, Inc., 2074 W Indianto	own Road, #200,
4. Date of incorp	poration/qualification: 06/20/1990 Document number:	N38749
	d street address of the current registered agent and registered office on file with timent of State: (If resigned, enter resigned)	h the
	Deborah Ross, Esquire	E R
•	759 S Federal Highway, Suite 212	TO THE PARTY OF
	Stuart, FL 34994	THE STATE OF
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offi	ce Print
	Ross Earle & Bonan, P.A.	
	789 S Federal Highway, Suite 101	
	P.O. Box NOT acceptable	
	Stuart, FL 34994	-
The street address changed will	ess of its registered office and the street address of the business office of its be identical.	s registered agent,
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an he board, or the corporation has been notified in writing of the change.	officer so
Lawren	ce Cichetti Laurence Cichett	i V, P.
I further agree a of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and com ad I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereb speen notified in writing of this change.	plete performance I agent. Or, if this by confirm that the
Sig	Rature of Registered Agent 9 Date	
If signing on be	chalf of an entity:	
Debcra	L Ross yped or Printed Name	

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