

Document Number Only

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WOODLAND STATION UNIT ONE REPLAT OWNERS, ASSOC, INC.

PMB 126

3945-1 ST JAMES BLVD R.O.S.

JACKSONVILLE, FL 32224-2654

City State Zip Phone

CORPORATION(S) NAME

- | | | |
|--|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of R.A. |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Call if Problem | <input type="checkbox"/> After 4:30 |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Will Wait | <input type="checkbox"/> Pick Up |
| <input type="checkbox"/> Walk In | | |
| <input type="checkbox"/> Mail Out | | |

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01 JAN - 8 PM 3:12
SECRETARY OF STATE
TALLAHASSEE FL 32301

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CR2E031 (1-89)

**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, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : WOODLAND STATION UNIT ONE REPLAT OWNERS ASSOCIATION, INC.
2. The mailing address of the corporation : PMB 126
3945-1 ST JOHNS BLUFF ROAD SOUTH JACKSONVILLE, FL. 32224-2654
3. Date of incorporation/qualification: 02/14/1992 Document number: NH7376
4. The name and address of the ~~current~~ registered agent and registered office:
FORMER REGISTERED AGENT. SEE ATTACHED FORM CR2E046
JAMES W. HART JR.
SENTRY MANAGEMENT
2180 STATE RD 434 W STE 5000 LONGWOOD, FL. 32779-5044
5. The name and address of the new registered agent (if changed) and /or registered office (if changed):
LINDA HOPPER, PRESIDENT
KATHLEEN PERERA, VICE-PRESIDENT
PMB 126 3945-1 ST JOHNS BLUFF ROAD SOUTH
JACKSONVILLE, FL. 32224-2654

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.

Linda Hopper (President)
Kathleen Perera (Vice President)
(Signature of an officer, chairman or vice chairman of the board)

LINDA HOPPER (PRESIDENT)
KATHLEEN PERERA (VICE-PRESIDENT)
(Printed or typed name and title)

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TALLAHASSEE, FLORIDA
1-5-01

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Linda Hopper (President)
Kathleen Perera (Vice President)
(Signature of Registered Agent)

1-5-01
(Date)

If signing on behalf of an entity:

(Typed or Printed Name) (Capacity)
ANY QUESTION, PLEASE, CALL K. PERERA @ (904) 642-5320

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