

N93000000998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

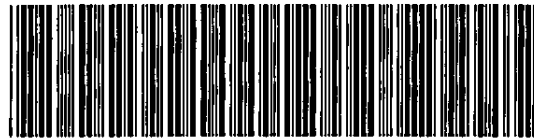
(Business Entity Name)

(Document Number)

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2007 SEP 10 PM 1:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

for  
9/11/07

X00789, 00721, 02960, 00524, 00671

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Carriage Crossing II Association, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N93 00 0000 998

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:

Cynthia Mercer  
(Name of Contact Person)

Mercer Property Management  
(Firm/Company)

PO Box 600712  
(Address)

Jax, FL 32260-0712  
(City/State and Zip Code)

For further information concerning this matter, please call:

Cynthia Mercer at ( 904 ) 292-4500  
(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 15, 2007

Cynthia Mercer  
Mercer Property Management  
P.O. Box 600712  
Jacksonville, FL 32260-0712

SUBJECT: CARRIAGE CROSSING II ASSOCIATION, INC.  
Ref. Number: N93000000998

We have received your document for CARRIAGE CROSSING II 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):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

To change the registered office, the enclosed form should be completed and returned to this office.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey  
Document Specialist

Letter Number: 907A00049813

(No phase)

Call & fix  
RECEIVED  
2007 SEP 10 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Carriage Crossing II Association, Inc.  
2. The principal office address: P.O. Box 600712  
JACKSONVILLE, FL 32260  
3. The mailing address (if different): Same  
4. Date of incorporation/qualification: 2/20/93 Document number: N-93000000998

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Vina Delcomyn  
4213 County Road 218  
Middleburg, FL 32068

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

Mercer property management  
11512 Lake mead Suite 405  
(P.O. Box NOT acceptable)  
JACKSONVILLE, FL 32256

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)

Pam Cowden - 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)

6/13/07  
(Date)

If signing on behalf of an entity:

Mercer Property Management  
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

**FILED**  
**2007 SEP 10 PM 1:46**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**