N93000001084

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| Special Instructions to Filing Officer: |
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Office Use Only



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June 12, 2008

JOHN ANDREW JACKSON 28 CORDOVA STREET ST. AUGUSTINE, FL 32084

SUBJECT: PINE LAKES HOMEOWNERS ASSOCIATION OF PALM COAST,

INC.

Ref. Number: N9300001084

We have received your document for PINE LAKES HOMEOWNERS ASSOCIATION OF PALM COAST, 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):

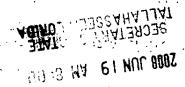
The document must contain the name and capacity of the person signing on behalf of the new registered agent.

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) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 308A00036099





COVER LETTER

SUBJECT: Pine Lakes Homeowner's Assoc. of Palm Coast,
(Name of Corporation) Inc.

DOCUMENT NUMBER: N930000 1084

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:

John Andrew Jackson
(Name of Contact Person)

Christine & Christine, P.A.

28 Cordova Street

St. Augustine, FL 32084
(City/State and Zip Code)

For further information concerning this matter, please call:

John Andrew Jackson at (904) 829-0523 (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

TO:

Amendment Section

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. |
| 10 th |
| 1. The name of the corporation: Pine Lakes Homeowners Associated Palm Coo |
| 2. The principal office address: 7 Florida Park Dr. N., Ste. C |
| Palm Coast, FL 32137 |
| 3. The mailing address (if different): PO Box 353820 |
| Palm Coast, FL 32135 |
| 4. Date of incorporation/qualification: 3/2/93 Document number: N930000108 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| Annon, Fred, Palm Coast Prop. Mgt. |
| 7. Florida Park Dr. N., Ste. C. |
| Palm Coast, FL 32137 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| Christine & Christine P. A. Sie |
| 28 Cordova Street |
| (P.O. Box NOT acceptable) |
| St. Augustine, FL 32136 |
| 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 of an effect or director) George R. Gold, Treasurer (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. |
| Attorney 4/30/08 (Date) |
| If signing on behalf of an entity: |
| J- Andrew Jackson, E59. (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 CR2E045 (8/05)