## N 93000002092

(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:			
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Red	questor's Name)	
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## COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: WindSOV Parke Property Junors Assoc, Inc.

DOCUMENT NUMBER: N930000 2092

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:

SHARUSEN THOMPSON

(Name of Contact Person)

Signature Rocky & Upnagement, Inc

1301-A Denman Rd

Jacksonville beach & 32250

For further information concerning this matter, please call:

SHAUSEN THOMPSON at (904) 241-5221 (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 LORIO in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Wirolson Parke Property Quiners Assoc., Ir
2. The principal office address: 10036 Sauxyass Dr. St. 1
Ponte, Vedra Rch, 5 32082
3. The mailing address (if different): 10036 Saway OSS BY. Ste
tonte Vadra Bch, 12 32082
4. Date of incorporation/qualification: Document number: N9300002092
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
May Management Services, Inc
5455 A1A South
Ponte Vedra Beach, 兄 32082 農 量
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Signature Realty & Management, 5
4003 Havtley Kood (P.O. Box NOT acceptable)
Jacksonville, 52 32257
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 officer or director)  Rocext L. Gold (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.
Dell Carel 4.27.06
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
BRYAN CANTRELL (Typed or Printed Name)

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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