N96000001064

(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:
.

Office Use Only



700059657967

10/14/05--01012--011 **35.00

05 OCT IL AMII: LG

COVER LETTER

Division of Corpor	ations	
SUBJECT: Sweetb	riar Homeowners (Name of Co	Association, Inc.
DOCUMENT NUMBER:	N 96 00000 10104	
The enclosed Statement of	Change of Registered Office	Agent and fee are submitted for filing.
Please return all correspond	lence concerning this matter	to the following:
	Lauren Carr (Name of Cont	act Person)
	Stazac Mana	gen ent, Inc.
	P.O. Box 579 (Addre	ess)
	Jacksonville (City/State and	Fl. 32Z4) Zip Code)
For further information con-	cerning this matter, please ca	ıll:
Lauren C (Name of Co	ontact Person)	at (904) 200-9183 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check	made payable to the Departn	nent of State.
Div P.C	iling Address: hendment Section vision of Corporations D. Box 6327 lahassee, 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 change is submitted for a corporation organized under the laws of the State of Flort do
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Sweetbriar Homeowners Association Inc.
2. The principal office address: One San Jose 91. 14E
Jacksonville, FL. 32257
3. The mailing address (if different): P. O Box 57911
Jacksonville, FL. 32241
4. Date of incorporation/qualification: 2/27/96 Document number: N960000 10104
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Patric R. Penn
One San Jose Pl. 14E F. B
Jackson ville, FL 32257 = S
Jackson Ville, Pt J2231 Fr -1
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Lauren Carr SE E
One San Jose Pl. 14E
(P.O. Box NOT acceptable)
Jacksonville, FL 37257
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) (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 of Registered Agent) (Date)
If signing on behalf of an entity:
(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 * * *