N98000005491

(Requestor's Name)		
(Address)		
(Address)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

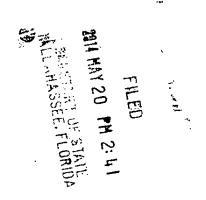
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RAI ROCharge

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Wedge field Community Association, Inc. Name of Corporation		
DOCUMENT NUMBER: NO8000007382		
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:		
James Brewer Name of Contact Person		
Firm/Company		
1841 Broadhaven Drive		
Middleburg Florida 32068 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
James Brewer Name of Contact Person at (904) 264-5771 Area Code & Daytime Telephone Number		
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 Street Address: Amendment Section		

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.050 statement of change is submitted for a corporation organ	
in order to change its registered office or regist	•
1. The name of the corporation: Wedge field	d Community Association Inc
2. The principal office address: 1841 Broad	thaven Drive
Middleburg, Fl. 32068	
3. The mailing address (if different): P.O. BOX	
Doctors Inlet, Fl.	34030-0805
4. Date of incorporation/qualification:	Document number: <u>59 - 342 42.33</u>
5. The name and street address of the current registered a Florida Department of State; (If resigned, enter resigned VIVA Delcomyn Awallnas Association	
4213 County Road	218, Sinte 1
Middleburg, FT. 32	MS
6. The name and street address of the new registered ages (if changed):	nt (if changed) and /or registered office
James Brewer	ED PR
1841 Broadhaven	Drive 50 %
Middleburg F1. 320	068
The street address of its registered office and the street as changed will be identical.	address of the business office of its registered agent,
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been no	by its board of directors or by an officer so tified 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 an I further agree to comply with the provisions of all stat performance of my duties, and I am familiar with and a agent. Or, if this document is being filed merely to refl hereby confirm that the corporation has been notified i	utes relative to the proper and complete accept the obligation of my position as registered
Signature of Registered Agent	5-14-14 Date
If signing on behalf of an entity:	
TAMES BREWER Typed or Printed Name	

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