

N98000005902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

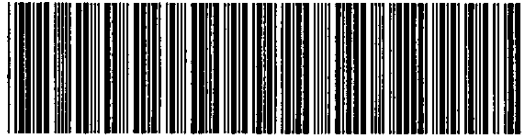
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300080298343

10/02/06--01024--014 \*\*35.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 OCT -2 PM 2:06

PA Change

10/03/06

Dc

LAW OFFICES OF  
**ROSS EARLE & BONAN, P.A.**

DEBORAH L. ROSS  
DAVID B. EARLE  
ELIZABETH P. BONAN

ROYAL PALM FINANCIAL CENTER  
SUITE 212  
750 SOUTH FEDERAL HIGHWAY  
STUART, FLORIDA 34994

MAILING ADDRESS:  
POST OFFICE BOX 2401  
STUART, FLORIDA 34995

TELEPHONE (772) 287-1745  
FAX (772) 287-8045

---

---

## *Memo*

---

---

**To:** Division of Corporations  
**From:** Katie Richter, *Legal Assistant to Deborah L. Ross, Esq.*  
**Subject:** Change of Registered Agent  
**Date:** September 29, 2006

---

Enclosed please find a change of registered agent form for St. James Golf Club Homeowners Association, Inc. along with a check in the amount of \$35.00 for your fee. Please do not hesitate to call if you have any questions. Thank you.

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** St. James Golf Club Homeowners Association, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N98000005902

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:

ROBERT M. EVANS  
(Name of Contact Person)

SAINT JAMES GOLF CLUB HOMEOWNERS ASSOCIATION FISC  
(Firm/Company)

5601 NW SAINT JAMES BLVD.  
(Address)

PORT SAINT LUCIE FL 34983  
(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT M. EVANS at ( 772 ) 337-7155  
(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

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: St. James Golf Club Homeowners Association, Inc.
2. The principal office address: 5601 NW St. James Blvd, Port St. Lucie, Fl 34983
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 10/15/1998 Document number: N98000005902

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

Maher, G.H.
5601 NW St. James Blvd
Port St. Lucie, FL 34983

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

Deborah Ross, Esquire
759 S. Federal Highway, Suite 212
(P.O. Box NOT acceptable)
Stuart, FL 34995

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 OCT -2 PM 2:06

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)

ROBERT M. EVANS TREASURE
(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)

9/26/06 (Date)

If signing on behalf of an entity:
(Typed or Printed Name)

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