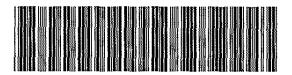
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TALLAHASSEE, FLORIBA

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COVER LETTER

SUBJECT: Gramercy Plantation Commercial Owners' Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N9900000881

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:

Ken Fish
(Name of Contact Person)

(Firm/Company)

PD Box 271
(Address)

A palachical Fish 32320
(City/State and Zip Code)

For further information concerning this matter, please call:

Air Balachical Register Person

at (850, 899-8689)

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 Division of Corporations

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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Gramercy Plantation Commercial Quarter Association 2. The principal office address: PO Box 271 Apalachicola, Fl. 32320
3. The mailing address (if different): (Same)
4. Date of incorporation/qualification: 2/11/1999 Document number: 1/9900000 881
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: Olivier Manad
Apalachicola, Fl. 3270 6. The name and street address of the new registered agent (if changed) and /or registered office ARE
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) Time N. Back cack (Printed or typed name and title)
I herely 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) If signing on behalf of an entity:

* * * 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)

(Typed or Printed Name)