

N 99000007182

(Requestor's Name)

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(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS
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R-A. Charge
C.COULLIETTE

SEP 03 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Marsh Island of Jacksonville Homeowners Association
Name of Corporation

DOCUMENT NUMBER: N99000007182

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:

Kimberly Harnage

Name of Contact Person

Property Management Partners, Inc.

Firm/Company

PO Box 600033

Address

Jacksonville, FL. 32260

City/State and Zip Code

Kimberly@pmpstjohns.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly Harnage

Name of Contact Person

at (

904

)

460-2785 x10

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: Marsh Island of Jacksonville Homeowners Association, INC.
2. The principal office address: 14286-19 Beach Blvd
Jacksonville Beach Florida 32250
3. The mailing address (if different): PO Box 600033
Jacksonville, FL. 32260
4. Date of incorporation/qualification: 12/07/1999 Document number: N99000007182
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Pierce, Adele R

14520 Marsh Island Ln

Jacksonville Beach Florida 32250

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

Property Management Partners, Inc.

12058 San Jose Blvd Ste 904

P.O. Box NOT acceptable

Jacksonville, FL. 32256

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

Agent for Marsh Island Elaine Brooks
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

9/27/10
Date

If signing on behalf of an entity:

Elaine Brooks

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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