POODOO 22787

(Requestor's Name) (Address) (Address)	300079034273
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	08/25/0601013 007 ** 35.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	OG AUG 25 AM 12: 55 SEUNE FARY OF STATE TALLAHASSEE. FLORIDA
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COVER LETTER

SUBJECT: South Ponte Vedra Partners, Inc. (Name of Corporation) DOCUMENT NUMBER: P00000022787 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: G. Alan Howard, Esq. (Name of Contact Person) Milam Howard Nicandri Dees & Gillam, P.A. (Firm/Company) 14 East Bay Street (Address) Jacksonville, FL 32202 (City/State and Zip Code) For further information concerning this matter, please call: G. Alan Howard (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

CR2E045 (8/05)

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: South Ponte Vedra Partners, Inc.
2. The principal office address: 5011 Gate Parkway, Suite 150, Jacksonville, FL 32256
3. The mailing address (if different): 5011 Gate Parkway, Suite 150, Jacksonville, FL 32256
4. Date of incorporation/qualification: 3/6/00 Document number: P00000022787
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Milam Howard Nicandri Dees & Gillam, P.A.
208 North Laura Street, Suite 800
Jacksonville, FL 32202
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Milam Howard Nicandri Dees & Gillam, P.A.
Milam Howard Nicandri Dees & Gillam, P.A. 14 East Bay Street
(P.O. Box NOT acceptable)
Jacksonville, FL 32202
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.
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(Signature of an officer of director) 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)

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