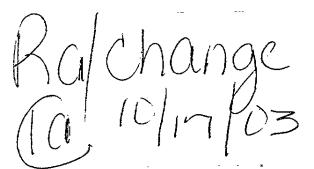
P00000038788

(Requestor's Name)
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TRANSMITTAL LETTER

SUBJECT: WATERCOLOR REALTY, INC. (No.	ame of corp	oration)			
DOCUMENT NUMBER: P00000038788		·			:	:
The enclosed Statement of Change of Registor	ered Offic	e/Ageni	and fee	are sub	mitted	for fi
Please return all correspondence concerning	this matter	to the	followin	g:		
SUSAN G. WHITLATCH (Name of person)		<u> </u>	.). 	-7	ã;	÷
THE ST. JOE COMPANY (Name of firm/company)	•			, -		, x
(Name of firm/company)		 `				
245 RIVERSIDE AVENUE SUITE 500 (Address)	<u>- · · · · · · · · · · · · · · · · · · ·</u>				, .	. •
JACKSONVILLE FL 32202 (City/state and zip code)			. 1	. * * * *		_
For further information concerning this matter	er, please o	all:				
SUSAN G. WHITLATCH	at (904	t)	301-44	50		
(Name of person)	at (<u>904</u> (Area	code &	daytime	telepho	ne numb	er)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section Division of Corporations

TO:

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, 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.	. WATERCOLOR REALTY INC
	he corporation: WATERCOLOR REALTY, INC.
2. The principal	office address: 245 RIVERSIDE AVENUE SUITE 500, JACKSONVILLE FL 32202
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 4/17/2000 Document number: P00000038788
	street address of the current registered agent and registered office on file with the tment of State: LAWRENCE PAINE
•	245 RIVERSIDE AVENUE SUITE 500
	JACKSONVILLE FL 32202
6. The name an changed):	d street address of the new registered agent (if changed) and /or registered office (if CHRISTINE M. MARX (P.O. Box or personal mailbox NOT acceptable)
The street addre	ess of its registered office and the street address of the business office of its registered will be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so board, or the opporation has been notified in writing of the change.
Dusa	Susan G. Whitlatch Chairman or the board) Susan G. Whitlatch Chairman or the board Acad Mainted or Super Junio 2 and title)
I hereby accept I further agree t performance of	channal or vice chairman of the board) Assistant Section 19 the composition of the board) the appointment as registered agent and agree to act in this capacity, o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as t. Or, if this document is being filed merely to reflect a change in the registered thereby confirm that the corporation has been notified in writing of this change.
(the	T/1/ hay 9/15/03
•	gnature of Registered Agent) (Date)
If signing on behalf	fof an entity:
	yped or Printed Name) (Capacity)
	* * * FILING FEE: \$35.00 * * * Make checks payable to Florida Department of State and Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314