

P040000024855

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

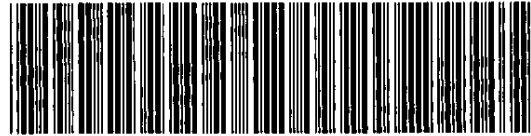
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900183343279

*RA Address
Change*

08/16/10--01013--016 **350.00

FILED
2010 AUG 16 PM 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
8/17/10



August 10, 2010

Florida Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Statement of Change of Registered Office for Corporations

Dear Sir or Madam:

Please find enclosed the form required to change the registered office address for each one the following entities:

1. Crooked Creek Utility Company
2. Residential Community Title Company
3. St. James Island Utility Company
4. St. Joe Central Florida Contracting, Inc.
5. St. Joe Community Sales, Inc.
6. St. Joe Finance Company
7. St. Joe-Southwood Properties, Inc.
8. St. Joe Utilities Company
9. Talisman Sugar Corporation
10. The St. Joe Community Foundation

Our check in the total amount of \$350.00 is also enclosed to cover the filing fee for each.

Please do not hesitate to call me at (904) 301-4459 if there is any question. Your assistance is appreciated.

Sincerely,

A handwritten signature in black ink, appearing to read "Lynne Lewis".

Lynne Lewis
Legal Dept Coordinator

/ll
Enclosures
133204.1

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CROOKED CREEK UTILITY COMPANY
(Name of Corporation)

DOCUMENT NUMBER: P04000024855

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:

Lynne Lewis, Legal Department Coordinator
(Name of Contact Person)

The St. Joe Company
(Firm/Company)

133 South WaterSound Parkway
(Address)

WaterSound, Florida 32413
(City/State and Zip Code)

For further information concerning this matter, please call:

Lynne Lewis at (904) 301-4459
(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: Crooked Creek Utility Company
2. The principal office address: 133 South WaterSound Parkway, WaterSound, FL 32413
3. The mailing address (if different): _____
4. Date of incorporation/qualification: February 5, 2004 Document number: P04000024855
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

The St. Joe Company

245 Riverside Avenue, Suite 500

Jacksonville, FL 32202

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

The St. Joe Company

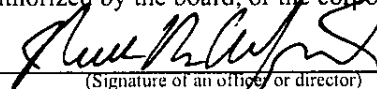
133 South WaterSound Parkway

(P.O. Box NOT acceptable)

WaterSound, FL 32413

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

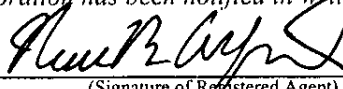
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Reece B. Alford, Secretary

(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.

By: 
(Signature of Registered Agent)

August 2, 2010

(Date)

If signing on behalf of an entity:

Reece B. Alford, SVP-Corp Counsel & Sec.

(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

CR2E045 (8/05)

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