## P0400066469

(Re	equestor's Name)	
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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: JACRE MANAGEMENT CO, INC.
(Name of Corporation)
DOCUMENT NUMBER: PO4000066469
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:
JEANETTE M. CREEL (Name of Contact Person)
JACRE MANAGEMENT CO, INC. (Firm/Company)
2510 46TH ST CT E (Address)
BRADENTON, FL 34208 (City/State and Zip Code)
For further information concerning this matter, please call:
JEANETTE M. CREEL at ( 941 ) 745-2959 (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  Street Address:  Amendment Section  Division of Corporations  Clifton Building

Tallahassee, FL 32314

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: JACRE MANAGEMENT COMPANY, INC.
2. The principal office address: 2510 46TH ST CT E
3. The mailing address (if different):
4. Date of incorporation/qualification: APRIL 22, 2004 Document number: PO4000066469
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
JEANETTE M. CREEL
811 15TH AVE W
PALMETTO, FL 34221
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JEANETTE M. CREEL
2510 46TH ST CT E
(P.O. Box NOT acceptable)
BRADENTON, FL 34208
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.
JEANETTE M. CREEL
(Signature of an other or dissold) (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 comporation has been notified in writing of this change.
Signature of Registered Agenti  (Signature of Registered Agenti  (Date)
(Signature of Registered Agent)  If signing on behalf of an entity:
JEANETTE M. CREEL
(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)