

P97000080910

Requester's Name	
Address	
City/State/Zip	Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

400004513914--0

-08/03/01--01043--009

*****35.00 *****35.00

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

01 AUG -3 1PM 3:34
DEPT. OF STATE
TALLAHASSEE, FLORIDA

FILED

- | | | |
|------------------------------------|---|--|
| <input type="checkbox"/> Walk in | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait | <input type="checkbox"/> Certificate of Status |
| <input type="checkbox"/> Photocopy | | |

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

*POA Charge
8-9-01
PMS*

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

**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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : TILLOO CAY, INC.
2. The mailing address of the corporation : 68 Players Club Villas
Ponte Vedra Beach, Florida 32082
3. Date of incorporation/qualification: 09/17/97 Document number: P97000080910
4. The name and address of the current registered agent and office:

Allen, Brinton & Simmons, P.A.

One Independent Drive, Suite 3200

Jacksonville, Florida 32202

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)

Stoneburner Berry & Simmons, P.A.

One Independent Drive, Suite 2000

Jacksonville, Florida 32202

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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.

Lynda S. Storkenson
(Signature of an officer, chairman or vice chairman of the board)

July 29, 2001
(Date)

Lynda Storkenson, President

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Sidney S. Simmons
(Signature of Registered Agent)

8/1/01
(Date)

If signing on behalf of an entity:

Sidney S. Simmons, II

(Typed or Printed Name)

Vice President

(Capacity)

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