

# N00313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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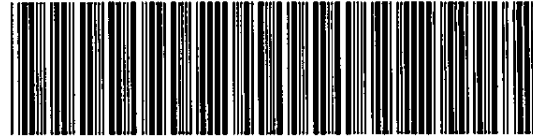
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Ocean Gallery Village Del Lago Condominium Asso., Inc  
Name of Corporation

**DOCUMENT NUMBER:** N00313

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:

**Ed Ronsman**

Name of Contact Person

**Jackson Law Group LL.M., PA**

Firm/Company

**1301 Plantation Island Drive, Suite 304**

Address

**St. Augustine, Florida 32080**

City/State and Zip Code

**eronsman@jacksonlawgroup.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Linwood S Simmons**

Name of Contact Person

at ( **904** ) **471-6655**

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, 617.1508, or 617.1508, Florida Statutes, this

statement of change is submitted for a corporation organized under the laws of the State of

in order to change its registered office or registered agent, or both, in the State of Florida.

THE OCEAN GALLERY VILLAGE DEL LAGO CONDOMINIUM ASSOCIATION, INC.

1. The name of the corporation:

4600 A1A SOUTH, SAINT AUGUSTINE, FL 32080

2. The principal office address:

3. The mailing address (if different):

4. Date of incorporation/qualification: 12/13/93 Document number: N00313

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (if resigned, enter resigned).

Ed Ransman, Ransman Law Group LMPA  
100 Westshore Plaza Suite 101  
St Augustine FL 32086

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

Jackson Law Group, LMPA  
B01 Protection Island Drive  
Suite 309  
St Augustine FL 32086

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

Wanda M. Whaley, President

Printed or typed name and title

I hereby 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

Edward Ransman

Date

3-12-14

If signing on behalf of an entity:

Edward Ransman  
JACKSON LAW GROUP, LMPA

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 (03/12)

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14 MAR 12 PM 3:00