5211 S. FLETC AMELIA ISLANI	HER AVE. S-230 D, FL 32034				
Current Mai	ling Address:				
3416 SEA M AMELIA ISL	ARSH RD AND, FL 32034 US				
FEI Number: 26-0303909			Certificate of Status Des	ired: No	
Name and Address of Current Registered Agent:					
POOLE, HARRISON W. ATTORNEY 303 CENTRE STREET SUITE 200 FERNANDINA BEACH, FL 32034 US					
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
SIGNATURE: HARRISON W. POOLE					
SIGNATURE	HARRISON W. POOLE			04/21/2020	
SIGNATORE	Electronic Signature of Registered Agent			04/21/2020 Date	
Officer/Direc	Electronic Signature of Registered Agent				
	Electronic Signature of Registered Agent	Title	DTRS		
Officer/Dire	Electronic Signature of Registered Agent	Title Name	DTRS NAFIE, MARSHA		
Officer/Dire	Electronic Signature of Registered Agent ctor Detail : DVP		-		
Officer/Dire Title Name	Electronic Signature of Registered Agent ctor Detail : DVP MITCHELL, TODD 5211 S. FLETCHER AVE. S-230	Name	NAFIE, MARSHA 3416 SEA MARSH RD		
Officer/Dire Title Name Address	Electronic Signature of Registered Agent ctor Detail : DVP MITCHELL, TODD 5211 S. FLETCHER AVE. S-230	Name Address	NAFIE, MARSHA 3416 SEA MARSH RD		
Officer/Direc Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : DVP MITCHELL, TODD 5211 S. FLETCHER AVE. S-230 AMELIA ISLAND FL 32034	Name Address	NAFIE, MARSHA 3416 SEA MARSH RD		
Officer/Direc Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent ctor Detail : DVP MITCHELL, TODD 5211 S. FLETCHER AVE. S-230 AMELIA ISLAND FL 32034 DSY	Name Address	NAFIE, MARSHA 3416 SEA MARSH RD		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARSHA DIXON NAFIE	DTRS

Electronic Signature of Signing Officer/Director Detail

FILED Apr 21, 2020 **Secretary of State** 7743647719CC

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005636

Entity Name: SOUTH FLETCHER PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: