701305

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA



COVER LETTER

Amendment Section Division of Corporations

TO:

	INC
SUBJECT: DOROTHY THOMAS FOUNDATION (Name of Corpora	ation)
DOCUMENT NUMBER: 701305	
The enclosed Statement of Change of Registered Office/Age	nt and fee are submitted for filing.
Please return all correspondence concerning this matter to the	e following:
Michael Thomas	
(Name of Contact I	Person)
Dorothy Thomas Foundation, Inc. (Firm/Compar	ny)
(mm compan	97
P.O. Box 3436	
(Address)	
Tampa, FL 33601	
(City/State and Zip	o Code)
For further information concerning this matter, please call:	
Michael Thomas at ((813) 839-6000 (Area Code & Daytime Telephone Number)
(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

statement of change is submitte	ed for a corporation organiz	, 607.1508, or 617.1508, Florida State ted under the laws of the State of <u>Flo</u> t red agent, or both, in the State of Flori	rida	
1. The name of the corporation	Dorothy Thomas Foundat	ion, Inc.		
2. The principal office address: Tampa, FL 33269	3412 Bay To Bay Blvd., St	uite B		_
3. The mailing address (if differ Tampa, FL 33601	rent): P.O. Box 3436			
4. Date of incorporation/qualifi	cation: 08/11/60	Document number: 701305		
5. The name and street address Florida Department of State:		ent and registered office on file with the	ne	
Thomas, M	ichael			
100 North	Tampa Street, Suite 1	1970	¥2 0	
Tampa, FL	33602		CARE LAH	
6. The name and street address (if changed):	of the new registered agent	(if changed) and /or registered office	18 AUG -4 PM 3: EGRETARY OF STA LLAHASSEE, FLOI	
3412 West	Bay To Bay Blvd., St	uite B	RIDA AUGA	
	(P.O. Box NOT acceptable)		A'A	
Tampa, FL	. 33629			
The street address of its regist as changed will be identical.	ered office and the street a	address of the business office of its re	egistered agent,	
Such change was authorized by authorized by the board, or the	by resolution duly adopted e corporation has been not	by its board of directors or by an off ified in writing of the change.	ficer so	
Spenature of an officer or o	COTICS	Michael Thomas, Chairman		
I hereby accept the appointme I further agree to comply with of my duties, and I am familia document is being filed merel corporation has been notified	ent as registered agent and the provisions of all statu ir with and accept the obli- y to reflect a change in the in writing of this change.	l agree to act in this capacity tes relative to the proper and comple gation of my position as registered a registered office address, I hereby o	ete performance gent. Or, if this confirm that the	
Molasten	//: 	07/01/08		
(Signature of Registere	d Agent)	(Date)		
If signing on behalf of an enti	ty:			
(Typed or Printed No	•			
	* * * FILING FE	E: \$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)