## 704908

(	Requestor's Name)		
(	Address)		
(	Address)		
	City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

Office Use Only



200080348272

10/23/06--01035--017 \*\*35.00

RA au chy,

FILED

06 OCT 23 AMII: 41

SECRETARY OF STATE
SALLAHASSEE, FLORIC

T. Roberts (OCT 2 4 2006

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: WOMAN'S EXCHANGE, INC., OI	F SARASOTA
DOCUMENT NUMBER: 704908	
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:
Kraig H. Koach, Esquire (Name of Con	stact Person)
Kimbrough & Koach, LLP	
(Firm/Co.	mpany)
1530 Cross Street (Addr	ess)
Sarasota, FL 34236-7015 (City/State an	d Zip Code)
For further information concerning this matter, please ca	all:
KRAIG H. KOACH (Name of Contact Person)	_at ( 941 ) 951-1234 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Departr	ment 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

7	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes	
-	ange is submitted for a corporation organized under the laws of the State of FLORI	DA
in ord	er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: WOMAN'S EXCHANGE, INC., OF SARASOTA	
2. The principal	office address: 539 SOUTH ORANGE AVENUE, SARASOTA, FL 34236-7501	
3. The mailing	address (if different): SAME	
		500 8
4. Date of incor	poration/qualification: 12/11/1962 Document number: 704908	F.C. 8
	d street address of the current registered agent and registered office on file with the rtment of State:	23 A
	WILLIAMS, PARKER, HARRISON, DIETZ & GETZEN	EE. FLOR
	1550 JOHN RINGLING BOULEVQRD	PRIE E
	SARASOTA, FL 33578	70
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office	
	KRAIG H. KOACH, ESQUIRE	
	1530 CROSS STREET	
	(P.O. Box NOT acceptable)	
	SARASOTA, FL 34236-7015	
The street addr as changed wil	ess of its registered office and the street address of the business office of its regist lbe identical.	tered agent,
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or by an officer he board, or the corporation has been notified in writing of the change.	· so
May	MARY HELEN KRESS, PRESIDEN (Printed or typed name and title)	Τ
	the appointment as registered agent and agree to act in this capacity.  to comply with the provisions of all statutes relative to the proper and complete pand I am familiar with and accept the obligation of my position as registered agenting filed merely to reflect a change in the registered office address, I hereby confished in writing of this change.	performance t. Or, if this irm that the
7/~	ignature of Registered Agent)  (Date)	
(S	gnature of Registered Agent) (Date)	
If signing on be	ehalf of an entity:	
	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)