Division of Corporations

768269

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Florida Department of State

Division of Corporations
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Division of Corporations

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From:

Account Name

: HARLLEE, PORGES, HAMLIN, KNOWLES, EALD & PROUTY, P.

Account Number: 076077002227 Phone: (941)748-3770

Fax Number : (941)746-4160

REGISTERED AGENT CHANGE

BRADENTON TROPICAL PALMS, INC.

 Certificate of Status
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 \$35.00

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HARLEE, PORGES, HAMLIN

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.	he Int

1. The name of the corporation is:Br	adenton Tropical	Palms, Inc.		
2. The mailing address of the corporation	is: 2310 14 th	Street West, Bradento	on, Florida 34205	<u>, U.S.</u>
2. The mailing address of the corporation			768269	
3. Date of Incorporation/qualification:	May 4 th , 1983	Document unimper.		
4. The name and address of the current	registered agent	and office:		2001 v
<u>William R. Ko</u>	m			SE SE
333 S. Tamla	ml Trail, Suite 19	<u>19</u>		- CZ-
· · Venice, Floric		_, _		2990
5. The name and address of the new re	gistered agent (it	f changed) and/or regis	itered office (if cn	angen. Sig
(P.O. Box Not Acceptable)				4: 5 4: 5
•	Thompson			59
Stephen W. Hadlee, Poro	es, Hamlin, Kno	vies.	-	
Bald & Prou	itv, P.A			
1205 Manate	e Avenue West	 .	. 5	
	lorida 34205	<u> </u>	· ·	
The street address of its registered office agent, as changed, will be identical. Such change was authorized by resolutions.				
authorized by the board.		•		
D P 11+	•		une 2	2001
(Signature of an officer, chairman or vi	ice chairman of t	he board)	(Date)	
Dawna R. Wertman, Secretary				.
/Printed or typed name and title)				
Having been named as registered agent I hereby accept the appointment as recomply with the provisions of all statute I am familiar with and accept the oblig (Signature of Registered Agent)	gioloico agrin -	roner and complete per	formance of my a	agree to uties, and
If signing on behalf of an entity:			_	
Stephen W. Thompson			Registered	Agent
(Typed or Printed Name)			(Capacity)	
• • •	* * * FILING FEE	: \$35.00 * * *	(((H01000076	:882 9)))
			-	
DIVISION OF CORPORATIONS	P.O. Box	6327 TALLAHA	SSEE. FL 32314	
NO. 1343 P. 2/2	N	HARLEE, PORGES, HAMLI	MAŽI:E LOC	10N. 27. 26