

K55029

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

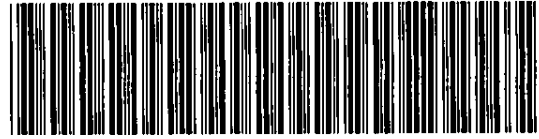
(Business Entity Name)

(Document Number)

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PA Change

12-20-12

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Messer Caparello & Self, P.A.
Name of Corporation

DOCUMENT NUMBER: K55029

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:

Norman H. Horton Jr
Name of Contact Person

Messer Caparello & Self, P.A.
Firm/Company

P.O. Box 15579
Address

Tallahassee FL 32317
City/State and Zip Code

llandis@lawfla.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Norman H Horton Jr at (850) 222 0720
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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Messer, Caparello, & Self, P.A.
2. The principal office address: 2618 Centennial Place, Tallahassee FL 32308
3. The mailing address (if different): P.O. Box 15579, Tallahassee FL 32317
4. Date of incorporation/qualification: 12/30/98 Document number: K55029
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)

Floyd R. Self, Esq.
2618 Centennial Place
Tallahassee FL 32308

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STATE DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA

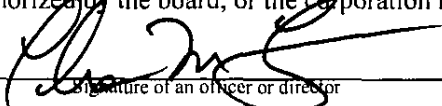
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Norman H. Horton Jr
2618 Centennial Place
Tallahassee FL 32308

P.O. Box NOT acceptable


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

Thomas M. Findley, Director and VP
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further 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

Dec. 19, 2012
Date

If signing on behalf of an entity:


Typed or Printed Name

*** FILING FEE: \$35.00 ***