

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM  
Account Number : PCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

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REGISTERED AGENT CHANGE  
BLOSSOM SCHOOL, INC.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 03      |
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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: BLOSSOM SCHOOL, INC.  
Name of Corporation

DOCUMENT NUMBER: N01000003973

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:

Richard Engwall  
Name of Contact Person

Blossom School Inc.  
Firm/Company

14088 Isot Blvd.  
Address

Clearwater, FL 33760  
City/State and Zip Code

rengwall@blossomschool.org  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard Engwall at ( 727 ) 539-7879  
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

CITEBOS (BOS)

**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: BLOSSOM SCHOOL, INC.
2. The principal office address: 14088 TROT BLVD., CLEARWATER FL 33760
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 05/09/2003 Document number: N03600003973
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)

TAMPA-LAWDOCK, INC.  
101 EAST KENNEDY BOULEVARD, SUITE 3400  
TAMPA FL 33602

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

C T Corporation System  
c/o C T Corporation System, 1200 South Pine Island Road  
Plantation, Florida 33324

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 officer or director

Richard Engwall  
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. On 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.

By: C T Corporation System  
[Signature]  
Signature of Registered Agent

7/13/2011  
Date

If signing on behalf of an entity:  
Laura Broderick  
Assistant Secretary

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E1MS (8/05)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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