N51483

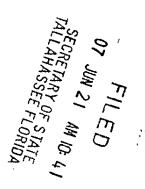
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
, ,				
(Document Number)				
,				
Certified Copies Certificates of Status				
· · · · · · · · · · · · · · · · · · ·				
Special Instructions to Filing Officer:				
•				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





500104489215

06/21/07--01010--018 **35.00





COVER LETTER

TO:	Amendment Section Division of Corporations	
	•	
SUBJE	$\mathbf{E_{CT:}}$ Fort Myers Scottish Rite Bodies, Inc., a Flo	orida Corporation not for profit
	(Name of Co	
DOCU	MENT NUMBER: N51483	
The en	closed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter	to the following:
	Douglas L. Rankin, Esq.	
	(Name of Cor	ntact Person)
	Law Office of Douglas L. Rankin	
	(Firm/Co	mpany)
	2335 Tamiami Trail North, Suite 308	
	(Addr	ess)
	Naples, FL. 34103	
	(City/State an	d Zip Code)
For fur	ther information concerning this matter, please c	all:
Dougla	as L. Rankin	at (239) 262-0061
	(Name of Contact Person)	at (239) 262-0061 (Area Code & Daytime Telephone Number)
Enclose	ed is a \$35.00 check made payable to the Departs	ment of State.
	Mailing Address: Amendment Section	Street Address:
	Amendment Section Division of Corporations	Amendment Section Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida rto change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	he corporation: Fort Myers Scottish Rite Bodies, Inc., a Florida Corporation not for profit	
2. The principal	office address: 3100 Evans Avenue, Fort Myers, FL. 33901	
3. The mailing ac	ddress (if different): P.O. Box 1133, Fort Myers, FL. 33902	
4. Date of incorp	poration/qualification: 10-23-1992 Document number: N51483	
	street address of the current registered agent and registered office on file with the tment of State:	
	Douglas L. Rankin, 590 Eleventh ST S, Naples, FL. 33940	
6. The name and (if changed):	SECRE TARY OF AM Street address of the new registered agent (if changed) and /or registered office	コニロフ
	Douglas L. Rankin, 2335 Tamiami Trail N., #308, Naples, FL. 34103	
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.	
(Signature) I hereby accept I further agree to of my duties, and accument is being the state of	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 performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this no filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
(Sig	(Date)	
If signing on bel	half of an entity:	
Douglas L. Ran	kin, Esq. 'yped or Printed Name)	

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