

N94000003913

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

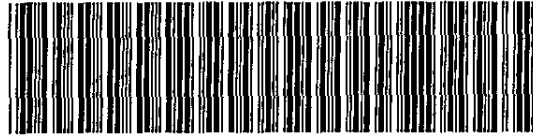
(Business Entity Name)

(Document Number)

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Goodman Breen & Gibbs

ATTORNEYS AT LAW

*Dorothy M. Breen**
*Nancy J. Gibbs**
*Kenneth D. Goodman**

3838 Tamiami Trail North, Suite 300
Naples, Florida 34103
(239) 403-3000
Fax (239) 403-0010

**Board Certified Attorney in*
Wills, Trusts & Estates Law

October 26, 2004

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: The Sharp Family Foundation, Inc.
Document No. N94000003913

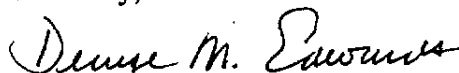
Dear Sir or Madam:

Enclosed for processing are a Cover Letter and Statement of Change of Registered Office or Registered Agent or Both for Corporations along with a check for \$35.00 for this filing.

Please acknowledge receipt of these documents by date stamping the enclosed copy of this letter and returning to our office in the enclosed self-addressed stamped envelope.

If you have any questions, please call our office.

Sincerely,



Denise M. Edwards
Legal Assistant

Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Sharp Family Foundation, Inc.
(Name of corporation)

DOCUMENT NUMBER: N94000003913

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:

Nancy J. Gibbs, Esquire

(Name of contact person)

Goodman Breen & Gibbs

(Firm/Company)

3838 Tamiami Trail North, Suite 300

(Address)

Naples, FL 34103

(City/state and zip code)

For further information concerning this matter, please call:

Nancy J. Gibbs

(Name of contact person)

at (239)

403-3000

(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
409 E. Gaines Street
Tallahassee, FL 32399

**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: The Sharp Family Foundation, Inc.
2. The principal office address: 1460 Gulf Boulevard, #603
Clearwater, FL 33767
3. The mailing address (if different): 4264 Montalvo Drive, Village Walk
Naples, FL 34109
4. Date of incorporation/qualification: 8/9/94 Document number: N94000003913

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

William K. Sharp
1460 Gulf Boulevard, #603
Clearwater, FL 33767

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TALLAHASSEE, FL

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

Goodman Breen & Gibbs
3838 Tamiami Trail North, Suite 300
(P.O. Box NOT acceptable)
Naples, FL 34103

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.

William K. Sharp
(Signature of an officer or director)

William K. Sharp, Director
(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]
(Signature of Registered Agent)

10/25/04
(Date)

If signing on behalf of an entity:

NANCY J. Gibbs
(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