## P95000010127

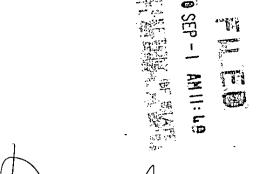
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## **COVER LETTER**

TO: Amendment Section Division of Corporations							
SUBJECT: KEESEE AND ASSOCIATES, INC.  Name of Corporation							
DOCUMENT NUMBER: P95000010127							
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:							
TREVOR K. BREWER, ESQ.							
Name of Contact Person							
BREWERLONG PLLC							
Firm/Company							
237 LOOKOUT PLACE STE 100 Address							
11da 555							
MAITLAND EL 22751							
MAITLAND, FL 32751 City/State and Zip Code							
TBREWER@BREWERLONG.COM  E-mail address: (to be used for future annual report notification)							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
TREVOR K. BREWER, ESQ. at ( 407 ) 660-2964							
TREVOR K. BREWER, ESQ. at (407) 660-2964  Name of Contact Person Area Code & Daytime Telephone Number							
Enclosed is a \$35.00 check made payable to the Department of State.							
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle							

Tallahassee, FL 32301

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

۲.

statement of change	e is submitted for a cor	poration organized	07.1508, or 617.1508, Fl Under the laws of the Sta agent, or both, in the Sta	ate of FLORIDA
. 1. The name of the	corporation: KEESE	E AND ASS	OCIATES, INC. SOM TRAIL, APOPI	
3. The mailing add	ress (if different):			
4. Date of incorpora	ation/qualification:	02/06/1995	_ Document number:	P95000010127
	reet address of the curre ent of State: (If resigne		and registered office on	file with the
<u>Н</u>	IENDRY, STONER	& BROWN, P.	А.	
2	0 N. ORANGE AV	E SUITE 600		
<u>o</u>	RLANDO, FL 328	01		SEP TO
(if changed):			changed) and /or register	red office
<del></del>				
<u>2</u> :	37 LOOKOUT PLA	P.O. Box NOT acc		
<u>M</u>	AITLAND, FL 327	51		
The street address as changed will be	of its registered office identical.	and the street add	ress of the business offic	ce of its registered agent,
			its board of directors or ed in writing of the chan	r by an officer so ge.
-	I an officer or director	<del></del>	MICHAEL T. KEES Printed or typed nar	me and title
I hereby accept the I further agree to c of my duties, and I document is being corporation has be	e appointment as regis comply with the provis I am familiar with and filed merely to reflect een patified in writing	tered agent and a ions of all statutes accept the obliga a change in the re of this change.	gree to act in this capaci relative to the proper a ion of my position as reg gistered office address,	ity. nd complete performance gistered agent. Or, if this I hereby confirm that the
1/1/	ne of Registered Agent		08/27/10	
If signing on behal			, p bac	
	BRELE MAI	VAGWG MEI		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)