

P39639

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : CONTRACTOR BUSINESS SERVICES, INC.
Account Number : I19990000053
Phone : (800) 571-4777
Fax Number : (727) 869-6660

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

05 JUN 28 PM 3:10

FILED

05 JUN 28 AM 8:00

REGISTERED AGENT CHANGE

HBI CONSTRUCTION MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HBI CONSTRUCTION MANAGEMENT, INC.
(Name of corporation)

DOCUMENT NUMBER: P39639

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:

RHONDA KONING
(Name of contact person)

CONTRACTOR BUSINESS SERVICES, INC.
(Firm/Company)

15409 U.S. HIGHWAY 19 NORTH
(Address)

HUDSON, FL. 34667
(City/state and zip code)

For further information concerning this matter, please call:

RHONDA KONING at (727) 862-8862
(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
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: HBI CONSTRUCTION MANAGEMENT, INC
2. The principal office address: 1027 TREMONT
GALVASTON, TX 77550
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 7/15/92 Document number: P39639

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

RHONDA E. KONING

8301 JOLIET STREET

HUDSON, FL. 34667

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

CONTRACTOR BUSINESS SERVICES, INC.

15409 U.S. HIGHWAY 19 NORTH

(P.O. Box NOT acceptable)

HUDSON, FL. 34667

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)

(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.

Rhonda Koning
(Signature of Registered Agent)

06/11/05

(Date)

If signing on behalf of an entity:

RHONDA KONING - pres. Contractor Business Services.
(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

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CLERK OF STATE
TALLAHASSEE, FLORIDA