N94000003585

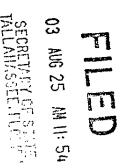
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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P.O. Box 46547 • Tampa, FL 33647-0105 Toll Free 1-800-357-7128 • Fax 813-264-0658

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

August 20, 2003

Please be advised that Florida Family Association, Inc. moved

from its office location at 12108 North 56th Street, Suite 1, Tampa, FL 33617

to the NEW OFFICE located at 11207 North 56th Street, Suite 2, Tampa, FL 33617.

Our mailing post office box and phone number have NOT changed.

Enclosed is a transmittal letter reflecting the same address change for the registered agent.

Sincerely

David Caton

Director

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Florida Family Association, Inc. (Name of corporation) DOCUMENT NUMBER: N9400003585
·
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:
David Caton (Name of person)
Florida Family Association, Inc (Name of Arm/company)
11207 North 56th Street, Suite Z
Tampa FL 33617 (City/state and zip code)
For further information concerning this matter, please call:
David Caton at (800) 357.7128 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.

TO: Amendment Section

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 in order to change its registered office or registered agent, or both, in the State	
of Florida.	
1. The name of the corporation: Florida Family ASSOCIATION, LNC.	
2. The principal office address: 11207 North 56th Street, Suite 2	New
Tampa, FL 33617	- Nodava
3. The mailing address (if different): PO Box 46547	
Tampa FL 336	<u></u>
4. Date of incorporation/qualification: July 18, 1994 Document number: N9400003	5B5
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
David Caton Zo 3	
12108 N. 56Th Street Suite 1 52 =	
	CHARLES.
	¥
6. The name and street address of the new registered agent (if changed) and /or registered office (if	-
changed): David Caton	U.
11207 North 56TH Street, Suite 2 =	
Tampa FL 33617	
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.	
authorized by the solad, or the corporation has been notified in writing of the change. David Caton. Director Tresvi	·• 1/
(Signature of an officer, chairman of vice chairman of the board) (Printed or typed name and little)	C F
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 of Registered Agent) 8-20-03 (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)	

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