## 282922

(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:				

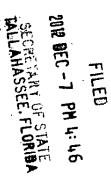
Office Use Only



600242405866

RA address

12/07/12--01021--016 \*\*35.00



10/12

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Foster Marine Contractors, Inc.

Name of Corporation

DOCUMENT NUMBER: 282922

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:

Kevin E Schwiderson

Name of Contact Person

Foster Marine Contractors, Inc.

Firm/Company

1550 Southern Blvd. Suite 100

Address

West Palm Beach, FL. 33406

City/State and Zip Code

kevins@foster-marine.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin E Schwiderson

<sub>2</sub>561 \ 683-0034

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of change	e is submitted for a corporation organiz	607.1508, or 617.1508, Florida Statutes, sed under the laws of the State of Florida	, this
	corporation: Foster Marine Cont	red agent, or both, in the State of Florida.	
	ice address: 1550 Southern Blvd		<del></del>
2. The principal offi	West Palm Beach, F		<u>_</u>
3. The mailing addre		2.00.100	
A Pote of income	ation/qualification: July 2, 1964	282922	
•			
	reet address of the current registered age ent of State: (If resigned, enter resigned)	ent and registered office on file with the )	
Ke	evin E Schwiderson	<u> </u>	
<u>73</u>	313 Westport PL.		
W	est Palm Beach, FL.33413	<sup>'</sup> ≟ <b>∑</b> ⊈	. 201
6. The name and stre (if changed):	reet address of the new registered agent	(if changed) and /or registered of the	F1L 9 <b>9</b> EC -7
Ke	evin E Schwiderson	EF. OF	PH PH
1550 Southern Blvd. Suite 100			
10/	P.O. Box NOT ac	cceptable	46
<u>.vv</u>	est Palm Beach, FL. 33406		
The street address of as changed will be i	of its registered office and the street ad identical.	ddress of the business office of its registe	ered agent,
_		by its board of directors or by an officer soled in writing of the change.	
		Kevin E Schwiderson, Preside	ent
I hereby accept the I further agree to co performance of my agent. Or, if this do	an officer or director  appointment as registered agent and a  comply with the provisions of all statute  duties, and I am familiar with and acc  ocument is being filed merely to reflect  t the corporation has been notified in v	es relative to the proper and complete cept the obligation of my position as regi t a change in the registered office addre	stered ss, I
		December 5,2012	
Signature	e of Registered Agent	Date	
If signing on behalf	of an entity:		
Typed o	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 CR2E045 (03/12)