366887

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	· #)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
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DIVISION OF PORTORATIONS

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COVER LETTER

TO:	Amendm Division	ent Section of Corporations	
SUBJ	ECT:	Mid-State Truss Co., Ir	
		(Name of Co	rporation)
DOC	UMENT N	UMBER: 366887	
The er	nclosed Star	tement of Change of Registered Office/	Agent and fee are submitted for filing.
Please	return all o	correspondence concerning this matter t	to the following:
		Joseph A. Geary, Es (Name of Cont	squire
		(Name of Cont	act Person)
Ross Vecchio, P.A. (Firm/Company)			
		(Firm/Con	npany)
		3308 Cleveland Height	ghts Blvd.
	•	(Addice	555)
		*-1-1-4 Br 2200	2
		Lakeland, FL 3380 (City/State and	Zip Code)
For fu	rther inforn	nation concerning this matter, please ca	
Jos	seph A.	Geary, Esquire	963 \ 701_2100
		lame of Contact Person)	at (<u>863</u>) 701-2100 (Area Code & Daytime Telephone Number)
Enclos	sed is a \$35	.00 check made payable to the Departn	nent of State.
		Mailing Address: Amendment Section	Street Address:
		Amendment Section Division of Corporations	Amendment Section Division of Corporations
		P.O. Box 6327	Clifton Building
		Tallahassee, FL 32314	2661 Executive Center Circle
			Tallahassee El 32301

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: Mid-State Truss Co Inc
2. The principal office address: 3125 Reynolds Road
Lakeland, FL 33803-8328
3. The mailing address (if different): P.O. Box 1606
EatonoPark, FL 33840-1606
4. Date of incorporation/qualification: <u>07/10/70</u> Document number: <u>366887</u>
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Dennis P. Johnson, Esquire (Deceased)
225 East Lemon Street
Lakeland, FL 33801
225 East Lemon Street Lakeland, FL 33801 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Joseph A. Geary, Esquire 3308 Cleveland Heights Blvd.
Joseph A. Geary, Esquire
ى 3308 Cleveland Heights Blvd.
(P.O. Box NOT acceptable)
Lakeland, FL 33803
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.
Mov 10 Zeos
(Finded or typed name and little) I hereby accept the appointment as registered agent and agree to act in this capacity. I further typee to comply with the provisions of all statutes relative to the proper and complete performance of my dulies, 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) (Date)
It signing on behalf of an entity:
alkfjsaldkfj (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
CR2E045 (8/05)