378915

CT CORPORATION SYSTEM

CORPORATION(S) NAME			_
Charles Stedman & Co., Inc.			
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() Foreign	() Reinstatement	PISE	
() Limited Partnership	() Annual Report	() Other	
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() LEC	() Fictitious Name	() UCC	<u></u> Z
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() common copy		. 035-4	RECEIVED
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Updater		•	
Verifier		Amount: \$	
W.P. Verifier		Amount. 5	

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

C. Coulliste DEC 0 5 2001

Florida Department of State, Sandra B. Mortham, Secretary of State

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, undersigned corporation organized under the laws of the State of F	LORIDA
submits the following statement in order to change its registered office State of Florida.	or registered agent, or both, in the
1. The name of the corporation is: CHARLES STEDMAN & CO., INC.	•
2. The mailing address of the corporation is: 1360 WHITFIELD A	VENUE, SARASOTA, FL 34243-129
3. Date of incorporation/qualification: 3/18/71 Docume	ent number: 378915
4. The name and address of the current registered agent and office:	2001 (SECR
Dale E. Nelson	DEC RETA AHAS
12005 MIDDLEBURY DRIVE	FILL SEFE
	ox Not Acceptable PA
5. The name and address of the new registered agent and office: (P. O. B.	ox Not Acceptable
C T Corporation System	——————————————————————————————————————
c/o C T Corporation System, 1200 South Pine Island Road	
Plantation, Florida 33324	
The street address of its registered office and the street address of the agent, as changed, will be identical.	business office of its registered
Such change was authorized by resolution duly adopted by its board of authorized by the board.	of directors or by an officer so
(Signature of an officer, chairman or vice chairman of the board)	(Date)
MARY A. RIBIKAWSKIS, ASST. VICE PRES. & SECRETARY (Printed or typed name and title)	(Date)
Having been named as registered agent and to accept service of processor corporation, I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statutes relative to performance of my duties, and I am familiar with and accept the oblive registered agent.	ess for the above stated lagree to act in this capacity. the proper and complete gation of my position as
Jeffrey R. Graves Assistant Secretary	12/5/61 (Date)
If signing on behalf of an entity:	•
(Typed or Printed Name)	(Ĉapacity)
CR2E045(4/95)	FILING FEE: \$35,00