## 455566

Surf & Sand  14601 Coulf Blad  Madeira Beach 2133708	
(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	



12/20/04--01086--001 \*\*35..00

FILED

04 DEC 20 MH 9: 16

SECRETARY CH STATE
TALLAHASSEL TI ORIGINA

R.A. change

T BROWN DEC 2 9 2004

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

Pursuant to the provisions of sections 607.0502, 617.0502, 6	507.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the S	tate of 71
submits the following statement in order to change its register	red office or registered agent, or both, in
the State of Florida.	1 7
1. The name of the corporation is: Surfand Sand	a Inc.
2. The mailing address of the corporation is: 14601	Coulf Blud
Madeira Beach 71 337	
3. Date of incorporation/qualification: 4/25/1977	
4. The name and address of the current registered agent and off	₹
Stewart Shriver	
11500 Coulf Blud	33704
Treasure Island 71 3	33704
5. The name and address of the new registered agent and office	: (P. O. Box Not Acceptable)
DAVID Hooper	: (P. O. Box Not Acceptable)
14601 Coulf Blud	SET OF
	3708
The street address of its registered office and the street addres agent, as changed, will be identical.	s of the business office of its registered
Such change was authorized by resolution duly adopted by its authorized by the board.	board of directors or by an officer so
Daniel Hopas	12/1/04
(Signature of an officer, chairman or vice chairman of the board)	(Date)
DAVID HOOPER President (Printed or typed name and title)	and the second s
Having been named as registered agent and to accept service corporation, I hereby accept the appointment as registered ag I further agree to comply with the provisions of all statutes reperformance of my duties, and I am familiar with and accept the registered agent.	of process for the above stated gent and agree to act in this capacity. lative to the proper and complete the obligation of my position as
David Hoose	12/1/04
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	(Capacity)
(Typed of Finded Name)	(Capacity)

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