542174

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporation	s				
SUBJECT:	THE BRIAR CORPOR	ATION			
	(, , , , , , , , , , , , , , , , , , , ,			
DOCUMENT NUMBER:	542174				
The enclosed Statement of Char	ge of Registered Office/Age	ent and fee are submitted for filing.			
Please return all correspondence	concerning this matter to th	e following:			
	MEL THOMPSON				
	(Name of p	erson)			
THE BRIAR CORPORATION					
	(Name of firm/	company)			
	P.O. BOX 470264				
	(Addre	ss)			
	LAKE MONROE, FL				
	(City/state and	zip code)			
For further information concern	ing this matter, please call:				
MEL THOMPSON		at (407 585-2556 (Area code & daytime telephone number)			
(Name of	person)	(Area code & daytime telephone number)			
Enclosed is a \$35.00 check mad	e payable to the Department	of State.			
Mailing Address: Amendment Section Division of Corporal P.O. Box 6327 Tallahassee, FL 323	tions	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 of change is submitted for a corporation of to change its registered office or regist	rganized under the laws of the Stat	e of FLORIDA	s statement of in order	
The name of the corporation:	THE BRIAR CORPORATION	ON		
2. The principal office address:	4570 ORANGE BLVD.			
	LAKE MONROE, FL 327	747		
3. The mailing address (if different):	P.O. BOX 470264			
	LAKE MONROE, FL 327	747		
4. Date of incorporation/qualification:	8/4/77 Document	number: 542174		
5. The name and street address of the c Florida Department of State:		d office on file with the		
	MICHAEL J. GOOD	**************************************		
	1885 W. LAKE MARY BLVD.			
	LAKE MARY, FL 32746	HAS:	3 1	
6. The name and street address of the n (if changed):	MICHAEL J. GOOD 4570 ORANGE BLVD. (P.O. Box or personal mailbox NOT acceptable)	FLÖRIÐA	AM 9: 53	
The street address of its registered of changed will be identical.			i agent, as	
Such change was authorized by resol the board, or the corporation has been	ition duly adopted by its board of notified in writing of the change.	directors or by an officer so	authorized by	
2 post	The state of the s	Y RIVERS, EXECUTIV		
I hereby accept the appointment as relatives, and I am familiar with and ac being filed merely to reflect a change been notified in writing of this change. (Signature of Registered Agent MICHAEL J. GOOD If signing on behalf of an entity:	gistered agent and agree to act in visions of all statutes relative to the ept the obligation of my position in the registered office address, I	(Printed or typed name and title) this capacity. the proper and complete performs registered agent. Or, if the hereby confirm that the corporate 3, 2004 (Date)	ormance of my	
(Typed or Printed Name)		(Capacity)		

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