



ACCOUNT NO. :

072100000032

REFERENCE : 202151

80749A

400002837314--6 -04/13/99--01001--027

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-04/13/99--01001--028

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\*\*\*\*\*35.00 \*\*\*\*\*35.00

AUTHORIZATION :

COST LIMIT :

ORDER DATE: April 12, 1999

ORDER TIME : 4:21 PM

ORDER NO. : 202151

CUSTOMER NO: 80749A

CUSTOMER:

Robert C. Sifrit, Esq

Farr Farr Emerich Sifrit And

2315 Aaron Street

Port Charlotte, FL 33952

CHANGE OF AGENT

NAME:

LORICCO, WILLIAMS, CROSLAND AND JOINER, C.P.A.'S, P.A.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Maria Stephens

## Florida Department of State, Sandra H. 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, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation is: LoRicco, Williams, Crosland and Joiner, C.P.A.'s, P.A. 2. The mailing address of the corporation is: 3005 Caring Way, Suite A, Port Charlotte, Florida 33952 3. Date of incorporation/qualification: 04/05/1979 Document number: 616510 4. The name and address of the current registered agent and office: Don E. Williams 3005 Caring Way, Suite A Port Charlotte, FL 33952 5. The name and address of the new registered agent and office: (P.O. Box NOT Acceptable) Brian W. Crosland 3005 Caring Way, Suite A Port Charlotte, FL 33952 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 office so authorized by the Board. (Signature of an officer, chairman or vice chairman of the Board) Having been named as registered agent and to accept service of process for the above-stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. (Signature of Registered Agent)

FILING FEE: \$35.00

(Capacity)

If signing on behalf of an entity:

(Typed or Printed Name)

PC: 27788-1