## 074314

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARD (10)

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT:	Jacobson Real Estate			
DOCUMENT NUM	,	674314		
	ent of Change of Registered Office	e/Agent and fee are submi	tted for filing.	
Please return all corre	espondence concerning this matter	to the following:		
	Phyllis A. Name of Co	McAllister ntact Person		
_	F1			
	Firm/Co	ompany		
_	1245 Carlton C		<del> </del>	
	Add	ress		
	**	EL 04040		
<u></u>	Fort Pierce City/State ar	, FL 34949 nd Zip Code	_ <del></del> ,	
	mcscoti@co	mcast net		
E	-mail address: (to be used for f	uture annual report noti	fication)	
For further information	on concerning this matter, please of	eall:		
Phy	llis A. McAllister	at ( 772 )	332-3484	
	of Contact Person	at ( <u>772</u> ) Area Code & Dayt	ime Telephone Number	
Enclosed is a \$35.00	check made payable to the Depart	ment of State.		
	Mailing Address: Amendment Section Division of Corporations	Street Address Amendment S Division of Co		
	Division of Corporations P.O. Box 6327	Clifton Buildi		
Tallahassee, FL 32314			2661 Executive Center Circle	

Tallahassee, FL 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: Jacobson Real Estate of Fort Pierce, Inc.
2. The principal office address: 1245 Carlton Court, Apt 105
Fort Pierce, FL 34949
3. The mailing address (if different):
4. Date of incorporation/qualification: 06/20/1980 Document number: 674314
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)
Donald E. Jacobson
1363 Bayshore Drive
Fort Pierce, FL 34949  6. The name and street address of the new registered agent (if changed) and /or registered office
1363 Bayshore Drive  Fort Pierce, FL 34949  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Phyllis A. McAllister
Phyllis A. McAllister
1245 Carlton Court, Apt 105
P.O. Box NOT acceptable
Fort Pierce, FL 34949
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.
Thomas A. Jacobson, President Signature of an officer or director  Thomas A. Jacobson, President Printed or typed name and title
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. 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.
Chyllish Mcallister October 8, 2010 Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Tipted 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