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## DOCUMENT # 733134 1. Entity Name PALMETTO AMATEUR RADIO CLUB, INC.

## FILED Jul 02, 2002 8:00 am Secretary of State 07-02-2002 90807 043 \*\*\*\*61.25

Principal Plac	ce of Business	Mailing Address					
3301 ISLAND I MIRAMAR FL US	DR	3301 ISLAND DR MIRAMAR FL US					
				1 1 <b>00</b> 101 1600 <b>1</b> (11		II <b>OIB</b> II <b>DIB</b> IZ <b>B</b> IB	II <b>818</b> II 1 <b>89</b> 3
2. Principal F	Place of Business	3. Mailing Address Show Suite, Apt. #, etc.					
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS :	SPACE	
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City & Stat	10	City & State		4. HEI Number	OT APPLICABLE	<del></del>	ot Applicable
Zip	Country	Zip	Country	5. Certificate of St	atus Desired	\$8.75 Add Fee Require	ditional
	6. Name and Address of Current	Registered Agent		7. Name and Add	ress of New Registered	Agent	
			Name				
ACHINS, E	BEN		Street A	Address (P.O. Box Number is f	Not Acceptable)		
3301 ISLA				•			
MIRAMAR	FL '		City			Zip Cod	
	<b>\range</b>		City		FL	- Zip Cou	
8. The above	e named entity submits this statement fo	r the purpose of changing its	registered office o	r registered agent, or both, in	the state of Florida.		1
SIGNATURE							
SIGNATURE	Signature, typed or printed name of registered agent of	and title if applicable. (NOTE	E: Registered Agent signal	ture required when reinstating)	DATE		
SIGNATURE				ture required when reinstating)			
	Signature, typed or printed name of registered agent	9. Election Can	npaign Financing	<b>\$5.00</b> May Be	Make Checl		
	Signature, typed or printed name of registered agent of the state of t		npaign Financing				
	Signature, typed or printed name of registered agent of the state of t	9. Election Can Trust Fund C	npaign Financing	\$5.00 May Be Added to Fees  ADDITIONS/CHANGI	Make Checl	nt of State	10
10.	FILE NOW: FEE IS \$61.25  OFFICERS AND DIF	9. Election Can Trust Fund C	npaign Financing Contribution.	\$5.00 May Be Added to Fees  ADDITIONS/CHANGI	Make Checl Departme ES TO OFFICERS AND DII	nt of State	10
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplied with the information indicated on this report or supplied with an address of the corporation or the receiper of trustee employered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

954-632-9912