737179

(Reque	stor's Name)	
(Addres	ss)	
(Addres	ss)	,
(City/Si	ate/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Nar	me)
(Docun	nent Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filir	ng Officer:	
:		

Office Use Only



900239778219

09/24/12--01048--024 **35.00

FARoch



SEP 2 6 2012

COVER LETTER

TO: Amendment Section Division of Corporations

Name of Corporation

POCUMENT NUMBER: 737179

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LINDA M. WHITE

Name of Contact Person

EPAR, INC.

Firm/Company

35108 PERCH DRIVE

Address

ZEPHYRHILLS, FL 33541

City/State and Zip Code

Lindawhite@Century21.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Linda M. White

at (813 783-4613

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of chang	ravisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of Florida to change its registered affice or registered agent, or both, in the State of Florida.
 The name of the The principal o 	e corporation: East Pasco Association of Realtors, Inc. office address: 5026 7th Street, Zephyrhills, FI 33542
3. The mailing add	dress (if different):
4. Date of incorpo	oration/qualification: 10-29-1976 Document number: 737179
5. The name and s	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
,	Amber Mae Olsen, Resigned
<u>-</u>	5026 7th Street
	Zephyrhills, FI 33542
6. The name and s (if changed):	street address of the new registered agent (if changed) and /or registered office
<u>;</u>	Shelby Norling
<u>:</u>	5026 7th Street
<u>:</u>	P.O. Box NOT acceptable Zephyrhills, FI 33542
The street addres as changed will b	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Sinda	Linda M. White, Secretary-Treasurer Printed or typed name and title
I hereby accept to I further agree to performance of n agent. Or, if this hereby confirm to	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete The symmetry and I am familiar with and accept the obligation of my position as registered The document is being filed merely to reflect a change in the registered office address, I The hat the corporation has been notified in writing of this change.
Thelly	- Worzlund 9-18-12 ature of Registered Abent Date
If signing on beh	**************************************

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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