737/88

Senior Connections of Southwest Florida, Inc. 475 E. Cowboy Way. P.O. Box 2400 C. C. LaBelle, P. 3975-2400	200023741532
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	10/20/0301049024 **3
Senior Connection of Souther 475 E. Cowboy Way La Belle, Fla,	est Florida, Inc.
33975-2460 Certified Copies Certificates of Status Special Instructions to Filing Officer:	SECRETA TALLAHA
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 23, 2003

SENIOR CONNECTION OF SOUTHWEST FLORIDA, INC. 475 E. COWBOY WAY LABELLE, FL 33975-2400

SUBJECT: SENIOR CONNECTIONS OF SOUTHWEST FLORIDA, INC.

Ref. Number: 737188

We have received your document for SENIOR CONNECTIONS OF SOUTHWEST FLORIDA, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Anna Chesnut **Document Specialist**

Letter Number: 603A00057951

Mo. Chesnut, Attached please find correct form completed for your review and processing

Senior Connections of Southwest Florida, Inc

Sue Gulley

Executive Director

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH EOR 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 FLORIVA
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: SENIOR CONNECTIONS OF SW FL, INC.
1. The hanne of the corporation:
2. The mailing address of the corporation: POB 2400 475 E. Cowbot Play
LaBelle FL 33975-2400
3. Date of incorporation/qualification: 1976 Document number: 72788
4. The name and address of the current registered agent and registered office:
SIEMIANOWSKI, TOM
982 Honeybee Dr.
Naples FL 33999
5. The name and address of the new registered agent (if changed) and /or registered office (if changed): (P.O. Box NOT Acceptable)
Melinda S. Gulley
475 E. Cowbox Wax
Labelle FL 33975-2400
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.
10/28/03
(Signature of an office), chairman of vice chairman of the board) (Date)
Millard Wagnon, Board President (Printed or typed name and title)
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) 15/28/03 (Date)
f signing on behalf of an entity: Melinda S. Gulley Executive Director (Typed or Printed Name) (Capacity)

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