

A9800001089

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

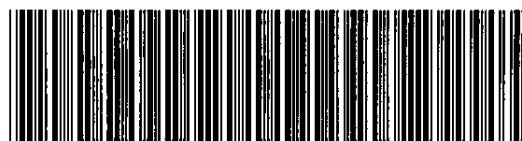
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500207566515

500207566515
05/17/11--01002--022 **70.00

FILED
11 MAY 17 PM 3:32
CLERK OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

MAY 18 2011

JOHN S. BALL*	JOHN E. LAWLOR, III*	CLAY B. TOUSEY, JR.*
ANNE BUZBY-WALT*	MICHAEL R. LEAS*	CLAY B. TOUSEY III
ROBERT A. DAWKINS*	ROBERT N. MILLER*	W. HAMILTON TRAYLOR*
JOHN F. FANNIN*	KRISTA WALDRON RAY	SHANNON P. VALENTINE*
MICHAEL W. FISHER**	ALLISON L. RINGLER	
BEVERLY H. FURTICK*	MARY A. ROBISON*	



PLEASE REPLY TO: JACKSONVILLE OFFICE

www.fishertousey.com

FISHER, TOUSEY, LEAS & BALL
ATTORNEYS AT LAW

May 13, 2011

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Please find enclosed for filing the following documents:

1. Statement of Change of Registered Agent – T.J. and Pansy Hawes Family Ltd.
2. Statement of Change of Registered Agent – Hawes Family, LP

Also enclosed is a check made payable to the Florida Department of State for \$70.00 which represents the required fee.

If you have any additional questions, please contact me at (904) 356-2600 ext. 368.

Sincerely,

Jill C. McPherson, FRP
Paralegal

Enclosures
278425

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. T.J. and Pansy Hawes Family Ltd.
Name of Limited Partnership or Limited Liability Limited Partnership
2. 04/30/1998 3. A98000001089
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

James D. Salter
Name
5719 NW 97th St
Address
Gainesville, FL 32653
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Deborah H. Pearce
Name
830 Fruit Cove Road
Florida street address (P.O. Box not acceptable)
Saint Johns FL 32259
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

T.J. AND PANSY HAWES, INC., General Partner

By: Deborah H. Pearce

Signature of General Partner Deborah H. Pearce, President

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 obligations of my position as registered agent.

Deborah H. Pearce

Signature of Registered Agent Deborah H. Pearce

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

FILED
11 MAY 17 PM 3:32
CLERK OF STATE
TALLAHASSEE, FLORIDA