

B99 000000 396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

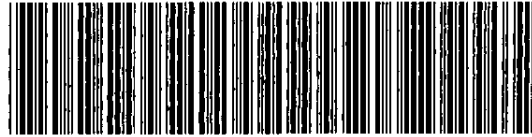
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500176319175

04/19/10--01052--008 **35.00

FILED
10 APR 19 PM 2:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

APR 20 2010

EXAMINER

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Gannon Joint Venture Limited Partnership

(Name of Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: B99000000396

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

Please return all correspondence concerning this matter to:

Matt Thompson

(Contact Person)

National Registered Agents, Inc.

(Firm/Company)

11600 College Blvd., Suite 210

(Address)

Overland Park, KS 66210

(City, State and Zip Code)

For further information concerning this matter, please call:

Matt Thompson at (800) 550-6724

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

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

STREET ADDRESS:

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

MAILING ADDRESS:

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

INHS04 (01/06)



National Registered Agents, Inc.
11600 College Boulevard
Suite 210
Overland Park, KS 66210
800.550.6724
Fax 913.851.0713

April 14, 2010

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Gannon Joint Venture Limited Partnership
Statement of Change of Registered Office or Registered Agent or Both for Limited
Liability Company

Dear Sir/Madam,

For the purposes of changing the registered office and registered agent of the above captioned Gannon Joint Venture Limited Partnership, please find enclosed, in duplicate, a Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company accompanied by our check in the amount of Amount of \$25.00.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed envelope.

Thank you in advance for your cooperation in this matter.

Sincerely,

Wendi M. Cook
National Registered Agents, Inc.

Enclosure - Check

**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. Gannon Joint Venture Limited Partnership

Name of Limited Partnership or Limited Liability Limited Partnership

2. 10/28/1999

Date of filing/registration in Florida

3. B99000000396

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:

Michael Hoeflinger

Name

11803 NE 11 Place

Address

Biscayne Park, FL 33161

City, State and Zip

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

NRAI Services, Inc.

Name

2731 Executive Park Drive, Suite 4

Florida street address (P.O. Box not acceptable)

Weston

FL 33331

City, State and Zip

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

By: Gannon Securities Company

Signature of General Partner

DAVID W. WEIGANDT

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.

NRAI Services, Inc.

by: Matt Thompson

Matt Thompson, Assistant Secretary

Signature of Registered Agent

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

FILED
10 APR 19 PM 2:18
CLERK OF STATE
TALLAHASSEE, FLORIDA