

D98000000062

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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*RA Change  
T. Lewis*

FILED  
JUN 14 04 14 05



## National Corporate Services, LLC

991 Lorimer Street  
Brooklyn, New York 11222

718-383-8033  
718-349-0001  
718-349-8858(Fax)

Email [mrmstsjsms@aol.com](mailto:mrmstsjsms@aol.com)

June 6, 2004

Division of Corporations  
Secretary of State of Florida  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: LEESBURG BNK INVESTORS, DBT  
LAKELAND BNK INVESTORS, DBT  
PASCO BNK INVESTORS, DBT  
PLANT CITY BNK INVESTORS, DBT**

Dear Corporation Division:

Enclosed herewith are the change of registered agent forms for the above four(4) business trusts. Additionally, a check is enclosed for \$140.00 the combined total of 4 x \$35.00.

Kindly mail me some sort of evidence(a filed stamped copy would be fine), to serve as proof that you have received these documents.

Sincerely yours,

Mark Skubicki

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a business trust organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the business trust LEESBURG BNK INVESTORS, DBT
2. The principal office address: C/O DALE GRAFF  
1502 TANGIER STREET, CORAL GABLES, FL 33134
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 12/09/98 Document number: D98000000062
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301-2525

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LESTER MILLER

1502 TANGIER STREET

(P.O. Box or personal mailbox NOT acceptable)

CORAL GABLES, FL 33134

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, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

LESTER MILLER

(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
(Signature of Registered Agent)

LESTER MILLER

5/5/04

(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

MANAGER

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

Wednesday, May 05, 2004.max

FILED  
JUN 11 11 14 AM '04  
TALLAHASSEE, FL