

# FOI000002630

SUNRISE  
6762 N PALM AVE  
PENSACOLA FL 32503

000005463670--9  
-05/06/02--01114--025  
\*\*\*\*\*70.00 \*\*\*\*\*35.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

02 MAY 22 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

- ☐ Walk in    ☐ Pick up time    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☒ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

May 14, 2002

SUNRISE PARTNERS INC., OF NW FLORIDA  
6762 N. PALAFOX  
PENSACOLA, FL 32503

SUBJECT: SUNRISE PARTNERS INC., OF NW FLORIDA  
Ref. Number: F01000002630

We have received your document for SUNRISE PARTNERS INC., OF NW FLORIDA and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 245-6869.

Teresa Brown  
Corporate Specialist

Letter Number: 302A00030627

PHONE 850-857-1550

RECEIVED  
02 MAY 22 AM 10:18  
DIVISION OF CORPORATIONS

**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, the undersigned corporation organized under the laws of the State of ALABAMA 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 : SUNRISE PARTNERS, INC. OF NW FLORIDA

2. The mailing address of the corporation : 541 Timber Ridge Dr  
PENSACOLA FLA 32534

3. Date of incorporation/qualification: 5/14/01 Document number: FO1000002630

4. The name and address of the current registered agent and office:

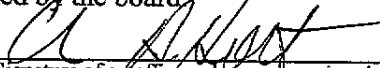
CHARLES H. HOLT  
541 Timber Ridge Dr  
PENSACOLA FLA 32534

5. The name and address of the new registered agent (if changed) and/or registered office (if changed)  
(P. O. Box Not Acceptable)

LEONARD L MYERS  
6762 N PALAFOX ST  
PENSACOLA FLA 32503

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

  
(Signature of an officer, chairman or vice chairman of the board)

5-10-01  
(Date)

CHARLES H. HOLT Pres.  
(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)

5-10-01  
(Date)

If signing on behalf of an entity:

LEONARD L MYERS  
(Typed or Printed Name)

President  
(Capacity)

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