

F02000005028

(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



200194724532

02/22/11--01013--016 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 FEB 22 PM 2:55

R.A. Charge
C.COULLETTE

FEB 22 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CENTER FOR INQUIRY, INC.
Name of Corporation

DOCUMENT NUMBER: F02000005028

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

Please return all correspondence concerning this matter to the following:

PAUL PAULIN
Name of Contact Person

CENTER FOR INQUIRY, INC.
Firm/Company

3965 RENSCH ROAD
Address

AMHERST, NY 14228
City/State and Zip Code

PPAULIN@CENTERFORINQUIRY.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAUL PAULIN at (716) 636-4869 EXT. 330
Name of Contact Person Area Code & Daytime Telephone Number

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 corporation organized under the laws of the State of NEW YORK in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CENTER FOR INQUIRY, INC.

2. The principal office address: 4011 S. MANHATTAN AVE. #139
TAMPA, FL 33611-1277

3. The mailing address (if different): 4011 S. MANHATTAN AVE. #139
TAMPA, FL 33611-1277

4. Date of incorporation/qualification: 10/03/2002 Document number: F02000005028

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

FREDRICK O'KEEFE
8807 CITRUS VILLAGE DR. APT. 102
TAMPA, FL 33626-3690

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

FREDRICK O'KEEFE
4011 S. MANHATTAN AVE. #139
P.O. Box NOT acceptable
TAMPA, FL 33611-1277

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 FEB 22 PM 2:55

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

THOMAS FLYNN / SECRETARY
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

2/14/2011
Date

If signing on behalf of an entity:

Typed or Printed Name

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