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REGISTERED AGENT CHANGE HERITAGE SERVICE GROUP OF FLORIDA, INC.

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NR 1 1/6/2011 1

COVER LETTER

TO:	Amendment of C							
SILIS	ም ረጥ•	HERITAGE SERVICE GRO	up of Florida, inc.					
SUBJECT: Name of Corporation								
poci	ument num	BER: FO	4000003824					
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:								
		Jeff	Mann					
	Name of Contact Person							
			,					
	Firm/Company							
		5130 Exe	cutive Blvd					
		Ad	dyeas					
		· Fort Wave						
	Fort Wayne, IN 46808 City/State and Zip Code							
	,	ieffin@l	rifee.com					
	· <u>-</u> E		future annual report notification)					
		i	•					
For further information concerning this matter, please call:								
			at ()					
	Name	of Connect 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 Tallabassee, FL 32301					

CR2E045 (\$/05)

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

statement of ch	ange is submitted for a cor	poration organi	2, 607.1508, or 617.1508, Flor ized under the laws of the State tred agent, or both, in the State	of Indiana		
	the corporation: Heritage S	•	_	e ey Piuriuu.		
	office address: 10003 Sat					
3. The mailing	address (if different): 5130	Executive Blvd	Fart Wayne, IN 46808			
4. Date of inco	rporation/qualification:	Indiana	Document number:	F04000003824		
5. The name an Florida Depa	od street address of the curr atment of State: (If resigne	ent registered ag d, enter resigned	ent and registered office on fil	e with the		
·	Larry Echols		·	· ·		
	6100 Estero Blvd.					
	Fort Myers Beach, FL 339	32	·			
6. The name an (if changed):		registered agent	t (if changed) and /or registered	SECRE LERE		
	C T Corporation System			JAN-6 AM		
•	c/o C T Corporation System, 1200 South Pine Island Road					
	P.O. Box NOT accipable Plantation, Florida 33324					
The street addr as changed wil	ess of its registered office I be identical.	and the street a	ddress of the business office	of its registered agent,		
Such change wanthorized by	as authorized by resolution the board or the corporation	n duly adopted on has been not	by its board of directors or b ified in writing of the change	y an officer so		
62/81	LIVE OF BIT OTTICES OF BURNOSOF	·	R. BRUCE	DYE		
-		tered agent and ions of all statu accept the obli a change in the of this change.	d agree to act in this capacity tes relative to the proper and gation of my position as registred testing and ress. I have address. I have address. I have address.	complete performance stered agent. Or, if this tereby confirm that the		
By:	Corporation System	-	1/5/2011			
If signing on 6	Antim of Registered Appli chalf of an emity: James M. H Assistant Sec Types of Printed Name	7	Date			

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

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
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