

F04000001490

(Requestor's Name)

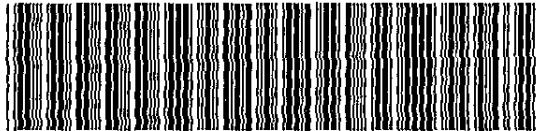
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: C.A. Reed Associates, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F06000001490

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:

Carl A. Reed, President

(Name of Contact Person)

C.A. Reed Associates, Inc.

(Firm/Company)

200 Saltonstall Street

(Address)

Canandaigua, NY 14424

(City/State and Zip Code)

For further information concerning this matter, please call:

Carl A. Reed / Margaret at (585) 394-1243
(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

