

F06000005323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

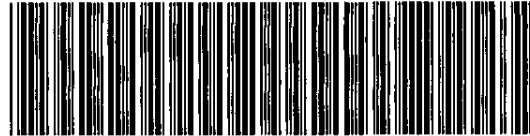
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 27 2012

C. MUSTAIN

RACER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FLORIDA TRANSFORMER, INC.
Name of Corporation

DOCUMENT NUMBER: F06000005323

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:

Myra Homer
Name of Contact Person

Capitol Services Registered Agent Department
Firm/Company

800 Brazos, Suite 400
Address

Austin, Texas 78701
City/State and Zip Code

PBRAZILL@VPG-INC.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Myra Homer at (800) 345-4647
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 DELAWARE
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FLORIDA TRANSFORMER, INC.
2. The principal office address: 4509 State Highway 83 N.
Defuniak Springs, FL 32433-3960
3. The mailing address (if different): 9820 Westpoint Drive, Ste. 300
Indianapolis, IN 46256
4. Date of incorporation/qualification: 8/14/2006 Document number: F06000005323
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)

NRAI Services, Inc.

515 E. Park Avenue

Street Address

Tallahassee

FL

32301

City

State

Zip Code

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

Capitol Corporate Services, Inc.

155 Office Plaza Drive, Suite A

Street Address (P.O. Box NOT acceptable)

Tallahassee

FL

32301

City

State

Zip Code

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]
Signature of an officer or director

PAT BRAZILL

Name (printed or typed)

CFO

Title (printed or typed)

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.

Delanie Case

Signature of Registered Agent

1-20-2012

Date

If signing on behalf of an entity:

Delanie Case, Asst. Secretary on behalf
of Capitol Corporate Services, Inc.

Name (printed or typed)

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

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

CR2E045 (8/05)

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