F15796

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Čit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	1
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





800017546808

05/05/03--01076--002 **35.00



na 5/13

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Indianwood Development Corporation. (Name of corporation)
DOCUMENT NUMBER:
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:
Arlene Gaskin (Name of person)
Indianwood Development Corp. (Name of firm/company)
14574 S.W. Rake Drive (Address)
Indiantown FL 34956 (City/state and zip code)
For further information concerning this matter, please call:
Arlene Gaskin at (772) 597-3791 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

TO:

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

	ne provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
	of change is submitted for a corporation organized under the laws of the State of
of Florida.	A in order to change its registered office or registered agent, or both, in the State
	f the corporation: <u>INDIANWOOD DEVELOPMENT CORPORATION</u>
	al office address: 14574 S.W RAKE Drive - P.O. BOX 335
	INDIANTOWN, FL 34956
3. The mailing	address (if different):
4. Date of inco	prporation/qualification: 1/22/8/ Document number: F15796
5. The name ar	nd street address of the current registered agent and registered office on file with the artment of State:
	ROBINSON, BARNETT J P.A.
	2255 GLADES RD SUITE 319 ATRIUM
	I BOCA PLACE BOCA RATON, FL 3.3431
	and street address of the new registered agent (if changed) and /or registered office (if
changed):	ROBINSON, BARNETTI PA
	120E. PALMETTO PARK RD - SUITE 150 (P.O. Box or personal mailbox NOT acceptable)
	BOCA RATON FL 33432
The street add agent, as chan	ress of its registered office and the street address of the business office of its registered ged will be identical.
Such change vauthorized by	was authorized by resolution duly adopted by its board of directors or by an officer so the board, of the corporation has been notified in writing of the change.
(Signature of an office	PICHARD I. SILLS VICE PRESIDE (Printed or typed name and title)
I hereby acce I further agre performance registered ag office address	pt the appointment as registered agent and agree to act in this capacity. The to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as ent. Or Al this document is being filed merely to reflect a change in the registered if I hereby confirm that the corporation has been notified in writing of this change.
12	1/1/1/03 FE &
If signing on bel	Signature of Registered Agent) (Date) (Date)
	(Typed or Printed Name) (Capacity) * * * FILING FEE: \$35.00 * * *
	MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314