F58576

| (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: |
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| |

Office Use Only



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07/02/07--01031--011 **35.00

SECHETARY OF STATE DIVISION OF CORPORATIONS

(37/5/07) NO



1101 First Avenue South St. Petersburg, Florida 33705 Phone: (727) 823-1965 Fax: (727) 822-2252 www.bayprintonline.com

June 28, 2007

Amendment Section Div. of Corporations PO Box 6327 Tallahassee FL 32314

Re: address change; F58576

Gentlemen:

I'm enclosing our check for \$35 and completed Statement of Change to change the address of our corporation AND registered agent.

Please call me if you have any questions. Thanks.

Sincerely,

Nancy J. Karnavicius

Vice President

enclosures

COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: BAYFRONT PRINTING COMPANY (Name of Corporation) **DOCUMENT NUMBER: F58576** 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: Algimantas A. Karnavicius; Registered Agent (Name of Contact Person) **Bayfront Printing Company** (Firm/Company) 2235 16th Ave. N. (New address) (Address) St. Petersburg, FL 33713-5623 (City/State and Zip Code) For further information concerning this matter, please call: at (727) 823-1965 (Area Code & Daytime Telephone Number) Nancy J. Karnavicius (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address:
Amendment Section Street Address: Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 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 Florida |
|---|
| in order to change its registered office or registered agent, or both, in the State of Florida. |
| 1. The name of the corporation: Bayfront Printing Company, a Fla corp (d/b/a "Bayprint") |
| 2. The principal office address: 2235 16th Ave. N., St. Petersburg, FL 33713-5623 (new address) |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: Dec 16, 1981 Document number: F58576 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: |
| Algimantas A. Karnavicius |
| 1101 First Ave. S. |
| St. Petersburg, FL 33705 |
| 1101 First Ave. S. St. Petersburg, FL 33705 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Algimantas A. Karnavicius 2235 16th Ave. N. |
| Algimantas A. Karnavicius |
| |
| (P.O. Box NOT acceptable) St. Petersburg, FL 33713-5623 |
| 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. |
| And Karnavicius, ViPres (Strange of an officer or director) Woncy T. Karnavicius, ViPres (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 not been notified in writing of this change. |
| (Signature of Registered Agent) (Date) |
| If signing on behalf of an entity: |
| (Typed or Printed Name) |

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