

F86327

Requester's Name

C

Victoria Mowinski  
P.O. Box 521489  
Longwood, FL 32752  
Phone #

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 DEC 15 AM 9:06

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- |                                   |   |  |
|-----------------------------------|---|--|
| <input type="checkbox"/> Walk in  | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy        |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait          | <input type="checkbox"/> Photocopy             |
|                                   |   | <input type="checkbox"/> Certificate of Status |

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

700003502747--6  
-12/15/00--01031--010  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

*RA Chg.*  
V. SHEPARD DEC 19 2000

Examiner's Initials

**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, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : IN BALANCE SYSTEMS, INC.

2. The mailing address of the corporation : P. O. 52-1485  
LONGWOOD, FL. 32852-1485

3. Date of incorporation/qualification: 6/22/82 Document number: F86327

4. The name and address of the current registered agent and office:

VICTORIA E. MOWINSKI

408 ALMERIA COURT

WINTER SPRINGS, FL. 32708

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P. O. Box Not Acceptable)

JAMES A. MOWINSKI

3286 SAFE HARBOR LANE

LAKE MARY, FLORIDA 32746

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.

James A. Mowinski  
(Signature of an officer, chairman or vice chairman of the board)

12/12/00  
(Date)

JAMES A. MOWINSKI VPD  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

James A. Mowinski  
(Signature of Registered Agent)

12/12/00  
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

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