Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000099591 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: BUSINESS FILINGS

Account Number : 105256001620

Phone

: (608)827-5300

Fax Number

: (608)827-5501

REGISTERED AGENT CHANGE

APPLIED PAVEMENT TECHNOLOGY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

4/17/2008

4080000995913

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

Pursuant to the	e provisions of	sections 607.0502, 6	517.0502, 607.1508, or 617.15	08, Florida Statutes,	
this statement o		• •	ion organized under the laws o cred office or registered agent,	•	
of Florida.		5 2	*	·	
1. The name of	the corporation	Applied Pavement T	echnology, Inc.		
2. The principal office address: 115 W. Main St., Ste. 400, Urbana				至 8	
				76 P	
3. The mailing address (if different):			NSS I		
			·	mo R	
4. Date of incor	rporation/qualifi	ication: 4/28/1997	Document number:	F97000002247	
	nd street address artment of State:		red agent and registered office	on file with the	
	CT CORPORA	ATION SYSTEM			
	1200 SOUTH	PINE ISLAND ROAD			
	PLANTATION	FL 33324			
6. The name a changed):			red agent (if changed) and /or	registered office (if	
	Business Filing	s incorporated		<u></u> .	
	1203 Governon	01			
(P.O. Box or personal mailbox NOT acceptable)					
	Tailahassee, Fl	orida 32301-2960			
The street addragent, as chang	ess of its registe sed will be ident	ered office and the structure.	reet address of the business of	fice of its registered	
Such change w authorized by t	as authorized by	y resolution duly ado corporation has been	pted by its board of directors on notified in writing of the cha	or by an officer so nge.	
XXIIIII 7	TSINUVU	irman of the board)	Kathryn A. Zimmerman, Presid		
I hereby accept I further agree performance of registered agen office address,	the appointment to comply with my duties, and	nt as registered agen the provisions of all I am familiar with a	t and agree to act in this capa statutes relative to the proper nd accept the obligation of my I merely to reflect a change in n has been notified in writing	city. and complete position as	
_H.w	ignature of Registered	Agent)	4)14/0g		
If signing on behal	f of an entity:				
Mark Williams	<u> </u>		AVP		
(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

H080000995913