

G68341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

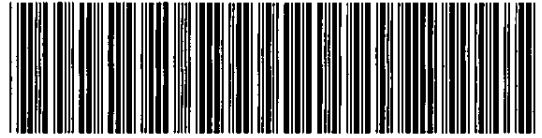
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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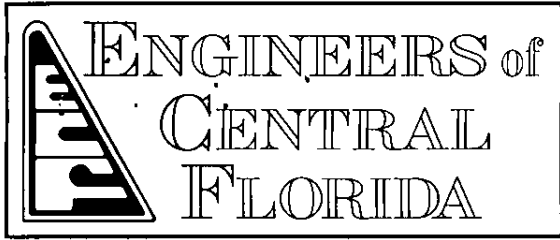
*RA
Change*

11/03/08--01066--009 **35.00

2008 NOV -3 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

*ASR
11/6/08*



October 30, 2008

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

Re: Change of Address for Registered Agent
Document Number G68341

Dear Sir or Madam:

Enclosed is completed Statement of Change of Registered Office or Registered Agent or Both for Corporations.

As you can see, the name of the Registered Agent remains the same, only the address has changed. Our check in the amount of \$35.00 is also enclosed.

If there are any questions, please contact me at 863-5-422-5517 extension 108. Thank you.

Respectfully,


Florence Montague
Accounting

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Engineers of Central Florida, Inc.
(Name of Corporation)

DOCUMENT NUMBER: G68341

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:

Florence Montague
(Name of Contact Person)

Engineers of Central Florida, Inc.
(Firm/Company)

700 Overlook Drive
(Address)

Winter Haven, FL 33884
(City/State and Zip Code)

For further information concerning this matter, please call:

Ronald Burchfield at (863) 422-5517
(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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Engineers of Central Florida, Inc.
- 2. The principal office address: 700 Overlook Drive
Winter Haven, FL 33994
- 3. The mailing address (if different): _____
- 4. Date of incorporation/qualification: 11/8/83 Document number: G68341

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)

Ronald S. Burchfield
29710 Highway 27
Lake Hamilton, FL 33851

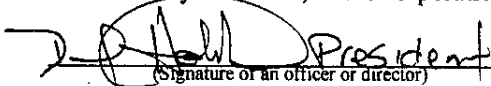
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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Ronald S. Burchfield
700 Overlook Drive
(P.O. Box NOT acceptable)
Winter Haven, FL 33884

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 of an officer or director)

David Holden, President
(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 has been notified in writing of this change.

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:
alkfjsaldkfj
(Typed or Printed Name)

***** 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)