

G75525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

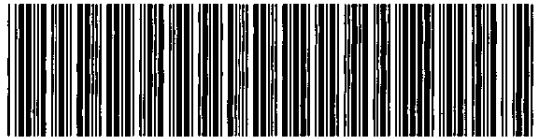
(Business Entity Name)

(Document Number)

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2008 MAY 22 PM 12:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B.A. Change

TB

5-23-08

**COVER LETTER**

**To:** Amendment Section  
Division of Corporations

**SUBJECT:** TBE Group, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** G75525

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:

Celeste Perrino  
(Name of Contact Person)

Bush Ross, P.A.  
(Firm/Company)

1801 North Highland Avenue  
(Address)

Tampa, Florida 33602  
(City/State and Zip Code)

For further information concerning this matter, please call:

Celeste Perrino at ( 813 ) 204-6425  
(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  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 15, 2008

CELESTE PERRINO  
BUSH ROSS, P.A.  
1801 N HIGHLAND AVE  
TAMPA, FL 33602

SUBJECT: TBE GROUP, INC.  
Ref. Number: G75525

We have received your document for TBE GROUP, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown  
Regulatory Specialist II

Letter Number: 808A00030866

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

*Pursuant to the provisions of sections 607.0502, 617.0502, 617.1508, 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: TBE Group, Inc.
2. The principal office address: 380 Park Place Blvd., Ste. 300, Clearwater, FL 33759
3. The mailing address (if different): 380 Park Place Blvd., Ste. 300, Clearwater, FL 33759
4. Date of incorporation/qualification: 12/19/1983 Document number: G75525
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Edward O. Savitz  
220 S. Franklin Street  
Tampa, FL 33602

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

Bush Ross Registered Agent Services, LLC  
1801 North Highland Avenue  
Tampa, Florida 33602

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.

Craig D. Snyder  
(Signature of an officer or director)

Craig D. Snyder Sr. VP, CFO  
(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. Of, 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]  
(Signature of Registered Agent)

May 20, 2006  
(Date)

If signing on behalf of an entity:

Celeste Perrin, Vice President  
(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)

**FILED**  
2006 MAY 22 PM 12:36  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE