

G92164

(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:

Office Use Only



700235453157

05/29/12--01024--008 **35.00

FILED
2012 MAY 29 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA
Change
SL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COASTAL CRAFTSMEN ALUMINUM, INC.
Name of Corporation

DOCUMENT NUMBER: G92164

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:

Kim Stanfield
Name of Contact Person

The Hogan Law Firm
Firm/Company

20 So. Broad Street
Address

Brooksville, Florida 34601
City/State and Zip Code

kstanfield@hoganlawfirm.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kim Stanfield at (352) 799-8423
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: COASTAL CRAFTSMEN ALUMINUM, INC.
2. The principal office address: 15046 LABOR PLACE, HUDSON FL 34667
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/13/1998 Document number: G92164

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)

FISHER & BUTTS

5200 SW 19TH TERRACE SUITE 101

GAINESVILLE FL 32608 US

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

THE HOGAN LAW FIRM, LLC

20 SO. BROAD STREET

P.O. Box NOT acceptable

BROOKSVILLE, FL 34601

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.

Wm Woodard
Signature of an officer or director

William M. Woodard, Director
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.

Deborah Hogan
Signature of Registered Agent

04/19/2012
Date

If signing on behalf of an entity:

Deborah Hogan, Manager
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)