## 514974

(Re	equestor's Name)	
(Ac	ldress)	
, (Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL .
(Business Entity Name)		
(Document Number)		
Certified Copies		
Special Instructions to Filing Officer:		



600105784866

07/13/07--01033--007 \*\*35.00

OT JUL 13 AM 9: 10

## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: R. Fry Builders Inc. (Name of Corporation)			
DOCUMENT NUMBER: J 14974			
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:			
(Name of Contact Person)			
R. Fry Builders Inc. (Firm/Company)			
1508 SE. IATH TECC. (Address)			
Cape Coral, Fla. 33990 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Suzane Kantarze at (239) 772 - 2666 (Area Code & Daytime Telephone Number)			
Fla.  Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallaharses 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: R. Fry Builders Inc.
2. The principal office address: 1508 SE, 12 <sup>TH</sup> Tecc.  Cape Coral Florida 33990
3. The mailing address (if different): (Same)
4. Date of incorporation/qualification: 5-20-86 Document number: 514974
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Catz, Rochelle 2,
Lesidential Ct.
Fort Myers, Florida 33919 2
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Connie D. Fry  1508 SE 12Th Terr.  (P.O. Box NOT acceptable)
Connie D. Fry
1508 SE 12TH TECC.  (P.O. Box NOT acceptable)
Cape Coral, Florida 33990
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)  Connic D. Fly  (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)  7/0/(Date)
If signing on behalf of an entity:
Cohnie D. Fry (Typed or Printed Name)

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