## )62619

(Requestor's Name)					
(Address)					
· , , ,					
(Address)	<u> </u>				
· (Address)					
(City/State/Zip/Phone #)					
PICK-UP	WAIT MAIL				
(Pusinosa F	ntity Nama)				
(Business E	Intity Name)				
(Document	Number)				
·					
Certified Copies Ce	ertificates of Status				
<u> </u>					
Special Instructions to Filing Of	ficer:				

Office Use Only



700188353907

12/29/10--01020--023 \*\*35.00

RECEIVED

10 DEC 29 PM 3: 42

R.A. Charge

DEC 2 9 2010

**EXAMINER** 

## **COVER LETTER**

то:	Amendment Section Division of Corporation	ns				
SUBJECT: KAREN A. GIEVERS, P.A.  Name of Corporation						
ĎOC	UMENT NUMBER:		J62619			
The e	nclosed Statement of Cha	ange of Registered Offic	e/Agent and fee are	submitted for filing.		
Please return all correspondence concerning this matter to the following:						
		RUSSELL Name of Co	GAUTIER ntact Person	<del></del>		
WILLIAMS, GAUTIER, GWYNN, DELOACH & SORENSON, P.A. Firm/Company						
	2010 DELTA BLVD. Address					
	TALLAHASSEE, FL 32303 City/State and Zip Code					
	E-mail address: (to be used for future annual report notification)					
For fu	rther information concer	ning this matter, please	call:	•		
	FRANK E	BACH	at ( 850 )	591-6714		
	Name of Conta	ct Person	Area Code &	591-6714  Daytime Telephone Number		
Enclos	sed is a \$35.00 check ma	de payable to the Depar	tment of State.			
	Divis P.O. I	ng Address: dment Section ion of Corporations Box 6327 nassee, FL 32314	Division Clifton B 2661 Exe	ent Section of Corporations		

## 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 Statement of change is submitted for a corporation organized under the laws of the State of $\underline{F}$	
in order to change its registered office or registered agent, or both, in the State of Flo	
1. The name of the corporation: KAREN A. GIEVERS, P.A.	
2. The principal office address: 2010 DELTA BLVD., TALLAHASSEE, FL 32303	
- <u></u>	
3. The mailing address (if different): 2010 DELTA BLVD., TALLAHASSEE, FL 323	103
4. Date of incorporation/qualification:3/18/1987 Document number:	J62619
5. The name and street address of the current registered agent and registered office on file with Florida Department of State: (If resigned, enter resigned)	the
Karen-A.Gievers	NIS SE
524 E. College Hue	DE SE
Tallahassee, Fl 32301	10 DEC 29
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed):	COMPORALION  9 PH 3: 42
RUSSELL GAUTIER	<b>79</b>
2010 DELTA BLVD.	
P.O. Box NOT acceptable	
TALLAHASSEE, FL 32303	
The street address of its registered office and the street address of the business office of its as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an cauthorized by the board, or the corporation has been notified in writing of the change.	officer so
Signature of an officer or director  KAREN GIEVERS.  Printed or typed name and title	e
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 comp of my duties, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I hereby corporation has been notified in writing of this change.	plete performance agent. Or, if this v confirm that the
Signature of Registered Agent Date	
Signature of Registered Agent Date	
If signing on behalf of an entity:	
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)