K08088

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SECRETARY OF STATE PALLAHASSEE, FLORID,

APPROVEL AND FILED

C. Countierte OCT 2 3 2007

JIM FISHER & COMPANY

685 VENETIAN BAY BOULEVARD

NEW SMYRNA BEACH, FLORIDA 32168

TO: **Amendment Section**

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Subject:

Jim Fisher & Company

Document Number: K08088

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:

James R. Fisher

Jim Fisher & Company

P.O. Box 2129

Cookeville, TN 38502

For further information concerning this matter, please call:

James R. Fisher

Daytime number (386) 299-2718

Enclosed is a check in the amount of \$35.00 payable to the Secretary of State.

Yours truly,

James R. Fisher, President

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 FLORIBG in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Jim FISHER & COMPANY
2. The principal office address: 685 VENETIAN BAY BIVD NEW SMYRNA BEACH, FL 32168
3. The mailing address (if different): P.O. Box 2/29 Cookeville, TN 38502
4. Date of incorporation/qualification: 12/21/1987 Document number: K08088
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
JAMES R. FISHER
872 SUGAR GROVE COURT
POT ADAMA # 22/20 PS 9
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): KIM STRODE
(P.O. Box NOT acceptable) HORD TAIL TO STATE TO
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) JAMES R. F16 HT R. 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) 10/19/(Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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