

K52525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

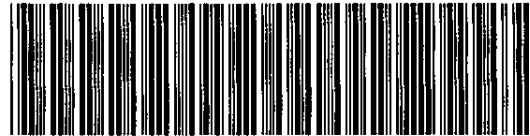
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATE AFFAIRS
SEP - 6 PM 4:04

RO/chs
@ 9/50/12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 7, 2012

SUE PARKER
PARKER-MAUST GROVES, INC.
P.O. BOX 1787
ARCADIA, FL 34265

SUBJECT: PARKER-MAUST GROVES, INC.
Ref. Number: K52525

We have received your document for PARKER-MAUST GROVES, 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):

You failed to list the new registered agent in part 6.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 612A00022700

*Jill/K Gibson

**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: Parker-Maust Groves, Inc.
2. The principal office address: 222 E OAK STREET, ARCADIA, FL 34266
3. The mailing address (if different): PO BOX 1787, ARCADIA, FL 34265
4. Date of incorporation/qualification: 12/16/1988 Document number: K52525
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)

PARKER, JOHN W., JR

222 E OAK STREET

ARCADIA, FL 34266

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

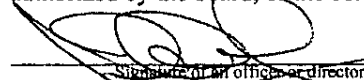
3242 NW SECOND BUNKER AVENUE

P.O. Box NOT acceptable

ARCADIA, FL 34266

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

John W Parker, Jr PD

Printed or typed name and title

9/4/12

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

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 (03/12)

SEP - 6 PM 4: 04
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA