L 03982

328 Mor Trcl(sonv) City/State/Zi	estor's Name H Scional Ave Address Me, Ma, 32250 Phone #	Office Use (002691462(-11/19/9801053011 *****35.00 *****35.00
1(Corpor		Document #)	<u>. </u>
	ation Name) (·
Walk in	Pick up time Will wait	.	itus
Profit NonProfit	AMENDMENTS Amendment Resignation of R.A., Officer/D		
Limited Liability Domestication	Change of Registered Agent Dissolution/Withdrawal		
Other OTHER FILINGS Annual Report Fictitious Name Name Reservation	REGISTRATION/- QUALIFICATION Foreign Limited Partnership Reinstatement Trademark	RAGORE	98 NOV 19 AM II: 34 SEUNE INTERIORIDA
l	Other	Examiner's Initials	

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	visions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu ution organized under the laws of the State of $ ext{Florida}$	tes, the
-	statement in order to change its registered office or registered agent, or both	, in the
1. The name of the co	orporation is: Coastal Science Associates, Inc.	
	·	OF FL
2. The mailing addres	ss of the corporation is: 328 North Second Avenue	OTAR TATE I NO
	Jacksonville, Beach, FL 32250	TALLN TITH A
3. Date of incorporat	tion/qualification: July 13, 1989 Document number: LO3982	OFFICE COMPANY NAMED IN COMPANY OF THE COMPANY OF T
4. The name and add	ress of the current registered agent and office:	NOTA
	Patricia Baca	Mex
	328 North Second Avenue	120
	Jacksonville Beach, FL 32250	11,000
5. The name and addi	ress of the new registered agent and office: (P. O. Box Not Acceptable)	May WI
***	Stephen Florey	W. B. K.
	328 North Second Avenue	(/ 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /
	Jacksonville Beach, FL 32250	1 H, al
Such change was au authorized by the bo	1-31-98	
-	n officer, chairman or vice chairman of the board) (Date) i.a. Baca	.3,
Financi.	al Officer 7-31-98	
Having been named corporation, I hereby further agree to cooperformance of my aregistered agent.	(Printed or typed name and title) (Date) as registered agent and to accept service of process for the above stated by accept the appointment as registered agent and agree to act in this capacity with the provisions of all statutes relative to the proper and complete duties, and I am familiar with and accept the obligation of my position as	city.
Diephren	The of Registered Agent) (Date)	_
f signing on behalf of a)) "
r signing on cenam of a	in the second	
	(Canacity) (7)	
CR2E045(4/95)	FILING FEE: \$35	
		2