Division of Corporations



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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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REGISTERED AGENT CHANGE EMERGENCY CONTINGENCY PLANS, INC.

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Corporate Filing Menu

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

statement of ch	he provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this change is submitted for a corporation organized under the laws of the State of Florida rder to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	of the corporation: Emergency Contingency Plans, Inc.	
2. The principa	pal office address: 230 83rd Avenue N.E.	
	ersburg, FL 33701	
_	g address (if different); P.O. Box 20002 etersburg, FL 33742	
4. Date of inco	corporation/qualification:	
	and street address of the current registered agent and registered office on file with they partment of State: (If resigned, enter resigned)	F11.
	Fisher & Sauls, P. A., 100 Second Avenue South	
	St. Petersburg, FL 33701	FILED
6. The name an (if changed):	and street address of the new registered agent (if changed) and /or registered office in the control of the new registered agent (if changed) and /or registered office in the control of the new registered agent (if changed) and /or registered office in the control of the new registered agent (if changed) and /or registered office in the control of the new registered agent (if changed) and /or registered office in the control of the new registered agent (if changed) and /or registered office in the control of the new registered agent (if changed) and /or registered office in the control of the new registered agent (if changed) and /or registered office in the control of the new registered agent (if changed) and /or registered office in the control of the new registered agent (if changed) and /or registered office in the control of the new registered agent (if changed) and /or registered office in the control of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered of the new registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are registered agent (if chang	D
	Roy E. Aiken	
	230 83rd Avenue N.E.	•
	P.O. Box NOT acceptable	
	St. Petersburg, FL 33701	,
The street addr as changed wil	dress of its registered office and the street address of the business office of its registered agent, ill be identical.	,
Such change wanthorized by t	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Signati	lature of an officed or director Printed or typed name and fille	
hereby accept I further agree performance of agent. Or, if th hereby confirm	pt the appointment as registered agent and agree to act in this capacity, se to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as registered this document is being filed merely to reflect a change in the registered office address, I m that the corporation has been notified in writing of this change.	
	Signature of Registered Agent Date	
	behalf of an entity:	
Т	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)