

L17901

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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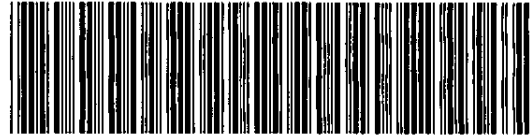
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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5-1-15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Jackson Brothers Electric, Inc.
Name of Corporation

DOCUMENT NUMBER: L17901

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:

John Neil Jackson

Name of Contact Person

Jackson Brothers Electric, Inc.

Firm/Company

11739 106th Court

Address

Largo, Florida 33778

City/State and Zip Code

neiljack5@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Neil Jackson

Name of Contact Person

at (727) 688-2815

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: Jackson Brothers Electric, Inc.
2. The principal office address: 11739 106th Court
Largo, Florida 33778
3. The mailing address (if different): _____
4. Date of incorporation/qualification: September 25, 1989 Document number: L17901
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)

Robert S. Jackson 111

6351 26th Avenue North

St. Petersburg, Florida 33710

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

John Neil Jackson

11739 106th Court

P.O. Box NOT acceptable

Largo, Florida 33778

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.

John Neil Jackson
Signature of an officer or director

John Neil Jackson
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.

John Neil Jackson
Signature of Registered Agent

April 22, 2015
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)