

SUITE 1400 301 EAST PINE STREET POST OFFICE BOX 3068

## ORLANDO, FLORIDA 32802-3068

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bbuchane

E-MAIL ADDRESS

BARBARA S. BUCHANAN

July 13, 2000

Ms. Karon Beyer, Bureau Chief Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Statement of Change of Registered Office

Dear Ms. Beyer:

300003326833---2 -07/18/00--01002--019 \*\*\*\*455.00 \*\*\*\*\*\*35.00

Enclosed for filing with your office are Statements of Change of Registered Office for each of the following entities together with our firm's check in the amount of \$455.00 to cover the filing fee of \$35.00 per Statement:

Bates & Company, P.A.
Bay Area Truck Sales, Inc.
Central Supply Company
Ciano's Custom Division, Inc.
Ciano's Professional Division, Inc.
Herold Consulting, Inc.
Herold Enterprises of Bradenton, Inc.

MK Marketing & Consulting, Inc.
The McFarlin Group, Inc.
Polk Truck Sales, Inc.
Qualified Retirement Plans, Inc.
The Silver Canyon Land Company
T.C. of Fort Myers, Inc.

Laubara Brechana

If you should have any questions regarding the enclosed request, please do not hesitate to telephone me.

Sincerely,

Barbara S. Buchanan

Paralegal

bsb Encls.

TALLAHASSEE 850-222-7717

MELBOURNE 321-727-8100

## STATEMENT OF CHANGE OF REGISTERED OFFICE FOR CORPORATIONS

Pursuant to the provisions of section	on 607.0502(3), 617.(	)502(3), 607,1508(2).	or 617 1508/2	2)
Florida Statutes, the undersigned r	egistered agent of a co	orporation organized r	inder the laws	of
the State of <u>FLORIDA</u> sub	mits the following sta	tement in order to cha	nge the regist.	oroć
office in Florida.	3	order to only	nge me regisu	CICU
1. The name of the corporation:	QUALIFIED RET	<u>TREMENT PLANS, I</u>	NC.	
	19852	7		
2. The street address of the current	registered office:			
	201 E. Pine Street		OD JI SECR SECR	<b>#</b>
€ X.	Orlando, Florida 32	2801	UL 18 I	0
3. The street address of the new registered office:			PN 4:3	
	301 E. Pine Street		34 RIDA	
<del></del>	Suite 1400			
	Orlando, Florida 32	801		
The corporation has been notified in	n writing of this chang	ge.		
The street address of the registered of registered agent, as changed, will be	office and the street ac	ddress of the business	office of the	
Date: 7-12-00	<del></del> ^.			
MIK		Michael I C		
Signature of Registered Agent)		Michael J. Canan (Printed or Typed Nam	ie)	_

Filing Fee: \$35.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

INHS28(9/98)