M25522

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Change

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AOR 2/24/06

COVER LETTER

TO: Amendment ! Division of C	Section orporations	
SUBJECT: Tom E	Ebro, Inc. (Name of C	orporation)
DOCUMENT NUM	BER: M25522	
The enclosed Stateme	nt of Change of Registered Offic	e/Agent and fee are submitted for filing.
Please return all corre	spondence concerning this matter	r to the following:
<u>R</u> .	Wade Wetherington, Esq (Name of Co	
w	etherington, Hamilton, Ha (Firm/Co	arrison & Fair, PA
<u>PO</u>	Box 172727 (Add	ress)
Tar	npa, FL 33672-0727 (City/State ar	nd Zip Code)
For further informatio	n concerning this matter, please of	eall:
R. Wade Wetherin	gton, Esquire of Contact Person)	at (813) 225-1918 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 c	heck made payable to the Depart	ment 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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida ir to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Tom Ebro, Inc.
2. The principal	office address: 19207 PRISTINE PLACE, LUTZ FL 33558-9044
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 01/08/1986 Document number: M25522
	I street address of the current registered agent and registered office on file with the tment of State:
	R. Wade Wetherington
	2625 Park Tower, 400 N. Tampa St.
	Tampa, FL 33602
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	R. Wade Wetherington, Esquire
	1010 N. Florida Avenue
	(P.O. Box NOT acceptable) Tampa, FL 33602
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	is authorized by resolution duly adopted by its board of directors or by an officer so le board, or the corporation has been notified in writing of the change.
Rhe	R. Wade Wetherington, Esquire (Printed or typed name and title)
I hereby accept I further agree i of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
UZ, WG	the Wethermaton 2/13/06 mature of Registered Agent) (Date)
If signing on be	half of an entity:
	etherington, Esquire
()	yped 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 (8/05)