

M65274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

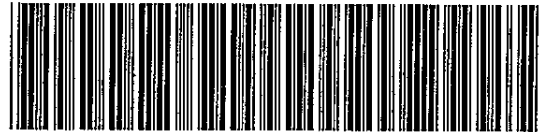
(Business Entity Name)

(Document Number)

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07/02/04--01006--011 **35.00

04 JUL 26 AM 8:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Chg.

1/3
7/28

**Glowacki Family Enterprises D/B/A
Okeechobee Asphalt & Concrete
503 NW 9th Street/ P.O Box 2128
Okeechobee, Florida 34974
(863)763-7373-(863)763-7379 fax**

Date: 6-29-04

To: Florida Department of State

Re: Registered Agent Change

To whom it may concern,

Attached is a form to change the registered agent information. Jacqueline Palmer is no longer with our company. She was let go 6-18-04. She is also under investigation at this time for mishandling of company funds. The office was cleaned out and no information or records has been found. We do not know the Florida registration date or the Florida document number to put on the form. We hope this change can be done with what you have on record. If you need any more information please feel free to call at the above number.

We appreciate your help in this matter to get this information changed as soon as possible.

Sincerely,


Michelle N. Brown
Bookkeeper/Office Manager

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Glowacki Family Enterprises, Inc.
(Name of corporation)

DOCUMENT NUMBER: MU5274

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:

Michelle N Brown
(Name of contact person)

Glowacki Family Enterprises, Inc.
(Firm/Company)

P.O. Box 2128
(Address)

Gleechobee, FL 34973
(City/state and zip code)

For further information concerning this matter, please call:

Michelle N. Brown at (863) 763-7373
(Name of contact person) (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
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 13, 2004

MICHELLE N. BROWN
GLOWACKI FAMILY ENTERPRISES
P.O. BOX 2128
OKEECHOBEE, FL 34974

SUBJECT: GLOWACKI FAMILY ENTERPRISES, INC.
Ref. Number: M65274

We have received your document for GLOWACKI FAMILY ENTERPRISES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6909.

Velma Shepard
Document Specialist

Letter Number: 704A00044619

RECEIVED
JUL 26 AM 10:52
DEPT. OF CORP. AFF.

**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: Glowacki Family Enterprises, Inc
2. The principal office address: 503 NW 9th St.
Okeechobee, Fl. 34972
3. The mailing address (if different): P.O. Box 2128
Okeechobee, Fl. 34973
4. Date of incorporation/qualification: 12-17-88 Document number: MU5274
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Joqueline J. Palmer
795 NE 30th Ave.
Okeechobee, Fl. 34974

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

Michelle N. Brown
503 NW 9th St.
(P.O. Box NOT acceptable)
Okeechobee, Fl. 34972

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.

Kim Glowacki
(Signature of an officer or director)

Kim Glowacki President/owner
(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.

Michelle N. Brown
(Signature of Registered Agent)

7/22/04
(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

04 JUL 26 AM 8:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA