

To: Florida Division of Corporations  
Subject: Change of Registered Agent Filing

From: Nichole Stone

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Florida Department of State  
Division of Corporations  
Public Access System  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

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REGISTERED AGENT CHANGE

FLORIDA RESEARCH CONSORTIUM, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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Corporate Filing Menu

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**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: Florida Research Consortium, Inc.
2. The principal office address: 150 S. Monroe Street, Suite 300  
Tallahassee, FL 32301
3. The mailing address (if different): P.O. Box 10331  
Tallahassee, FL 32302
4. Date of incorporation/qualification: 09/05/2001 Document number: N01000006307
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

American Information Services, Inc.

1 S.E. Third Avenue, Suite 2800

Miami, FL 33131

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

CorpDirect Agents, Inc.

515 E. Park Avenue

(P.O. Box NOT acceptable)

Tallahassee, FL 32301

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.

  
(Signature of an officer or director)

B. J. SULLIVAN  
(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.*

  
**Assistant Secretary**  
(Signature of Registered Agent)

10/18/2007

(Date)

If signing on behalf of an entity:

Ricky Soto

(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  
CR3E045 (8/03)

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