

No2055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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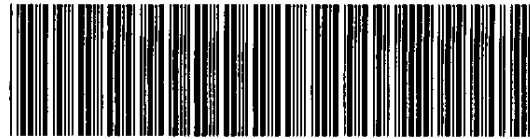
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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R. A. Charge
C. COULLIETTE

JAN 20 2011

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Seniors in Service of Tampa Bay, Inc.
Name of Corporation

DOCUMENT NUMBER: N 02055

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:

Tammy Criollo
Name of Contact Person

Seniors in Service of Tampa Bay, Inc.
Firm/Company

1306 West Sligh Avenue
Address

Tampa, Florida 33604
City/State and Zip Code

+ Criollo @ seniorsin service . org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tammy Criollo at (813) 932-5228 x224
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
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: Seniors in Service of Tampa Bay, Inc.
2. The principal office address: 1306 West Sligh Avenue
Tampa, Florida 33604
3. The mailing address (if different): Same as above
4. Date of incorporation/qualification: 9/29/1997 Document number: NO 2055

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)


Grace H. Puterman
1306 W. Sligh Ave
Tampa, FL 33604

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

Tammy Criollo
1306 West Sligh Avenue
P.O. Box NOT acceptable
Tampa, Florida 33604

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

Dawn Farfante, Secretary/Treasurer
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.


Signature of Registered Agent

January 1, 2011
Date

If signing on behalf of an entity:

Tammy Criollo
Typed or Printed Name

*** FILING FEE: \$35.00 ***

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