N03000002869

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SECRETARY OF STATE

R.A. Change

B 7/24/08

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Everglades Forever Partnership, Inc. (Name of Corporation)			
DOCUMENT NUMBER: CR2E045 (8/05)			
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:			
	-		
Richard Johnston			
(Name of Contact Pe	rson)		
Everglades forever Partnership Inc.			
(Firm/Company)		
5730 Corporate Way, Suite 214 (Address)			
West Palm Beach FL 33407-2032			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Gary Splain at (688-0061 Area Code & Daytime Telephone Number)		
(ivalue of Contact Ferson)	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

ursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this atement 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.
The name of the corporation: Everglades Forever Paartnership, Inc.
The principal office address: 5730 Corporate Way, suite 214, West Palm Beach, FL 33407-2032
The mailing address (if different):
Date of incorporation/qualification: 04/03/2003 Document number: N0300002869
. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Peninsula Registered Agents, Inc.
200 S. Biscayne Blvd. 43rd Floor
200 S. Biscayne Blvd. 43rd Floor Miami, FL 33131 ASA PASS PRODUCT TALE REPORT TO THE PRODUCT TALE REPORT TALE REPORT TO THE PRODUCT TALE REPORT TALE RE
The name and street address of the new registered agent (if changed) and for registered office
(if changed): Richard Johnston FIGURE 8: 32
5730 Corporate Way, suite 214
(P.O. Box NOT acceptable) West Palm Beach, FL 33407-2032
the street address of its registered office and the street address of the business office of its registered agent, s changed will be identical. uch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board or the corporation has been notified in writing of the change.
Richard Johnston
(Printed or typed name and title) hereby accept the appointment as registered agent and agree to act in this capacity, further agree to comply with the provisions of all statutes relative to the proper and complete performance f my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this ocument is being filed merely to reflect a change in the registered office address, I hereby confirm that the orporation has been notified in writing of this change.
7-18-08 (Date)
(Date) (Signature of Registered Agent) (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 CR2E045 (8/05)