

N03000005696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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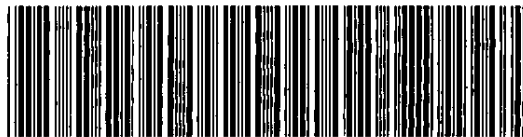
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A.

TB

OCT 26 2009

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: TOO FAR WATER AND NATURAL RESOURCE  
Name of Corporation FOUNDATION, INC.

DOCUMENT NUMBER: N03000005696

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:

AL GRUBMAN

Name of Contact Person

Firm/Company

946 PRITCHARD ISLAND ROAD

Address

INVERNESS, FL 34450

City/State and Zip Code

GRUBMAN1@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AL GRUBMAN

Name of Contact Person

at ( 352 ) 726-2201

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

REGISTERED  
OFFICE/AGENT  
CHANGE

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: TOO FAR WATER AND NATURAL RESOURCE FOUNDATION, INC.
2. The principal office address: 946 PRITCHARD ISLAND ROAD  
INVERNESS, FL 34450
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 6/30/03 Document number: N03000005696
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)

WILSON, MARCO - RESIGNED -  
1215 S. OTTO POINT  
INVERNESS FL 34450

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

AL GRUBMAN  
946 PRITCHARD ISLAND ROAD  
P.O. Box NOT acceptable  
INVERNESS, FL 34450

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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.

Pat Brady  
Signature of an officer or director

PAT BRADY DIRECTOR/SECRETARY  
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.

Al Grubman  
Signature of Registered Agent

10/22/2009  
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