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(((H070001728703)))



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To:

Division of Corporations

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: (850)205-0380

From:

Account Name : AKERMAN SENTERFITT - TAMPA

Addount Number : 12000000249 Phone : (813)223-7333

Fax Number : (813)223-2837

REGISTERED AGENT CHANGE

FAST FRIENDS GREYHOUND ADOPTION, INC

Certificate of Status	0
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T-963 P.002/002 F-045

STATEMENT OF CHANGE OF REGISTERED OFFICE FOR CORPORATIO

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.	
	the corporation: Fast Friends Greyhound Adoption, Inc.	
	office address: 5400 Bradenton Road, Sarasota, FL 34234	_
z. me himerbar		
3. The mailing a	address (if different):	_
4. Date of incorp	poration/qualification: 11/09/2004 Document number: N04000010552	<u>-</u>
	d street address of the current registered agent and registered office on file with the atment of State:	
	Charles S. Neilson	
	2002-B Beach Trail	
	Indian Rocks Beach, FL 33785	#
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	T
	American Information Services, Inc.	
	401 E. Jackson Street, Suite 1700	
	(P.O. Box NOT occeptable) Tampa, FL 33602	
The street address changed will	ess of its registered office and the street address of the business office of its registered agent,	
Such change w	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Haien	Lele Jack G. Collins, Director	
	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the speen notified in writing of this change.	
Abras	In State of Registered Agent) (Date)	
_	ehalf of an entity:	
	L. Evans ASST. & Octory Typed or Printed Name)	
`	* * * FILING FEE: \$35.00 * * *	
•	MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327. TALLAHASSEF, FL 32314

CR2E045 (8/05)

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