N06000009474

(Re	equestor's Name)	,
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☐ ЫСК-ŃЬ	☐ WAIT	. MAIL
(Ві	usiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
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COVER LETTER

Division of Corporations	
SUBJECT: Bullock Memorial Rodeo, Inc. (Name of Corpo	pration)
DOCUMENT NUMBER! 06000009474	·
The enclosed Statement of Change of Registered Office/Ag	gent and fee are submitted for filing.
Please return all correspondence concerning this matter to t	he following:
Jackie A.	Croft
(Name of Contact	t Person)
(Firm/Compa	any)
1125 Sunsh	
(Address)	
Leesburg, (City/State and Z	fl 34748 ip Code)
For further information concerning this matter, please call:	•
• ,	
Jackie A Croft (Name of Contact Person)	t (<u>352</u>) <u>259-3636</u> (Area Code & Daytime Telephone Number)
,	
Enclosed is a \$35.00 check made payable to the Departmen	at of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	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: Bullock Memorial Rodeo Inc.			
2. The principal	office address: 1125 Sunshine Ave	<u> </u>		
Leesburg,	FL 34748			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 8-24-06 Document number: N0600000	9474		
	d street address of the current registered agent and registered office on file with the trument of State: (If resigned, enter resigned)	ıe		
	Sandra J Bullock	ž.		
	2596 SR 471	37	09,	
	Sumterville, FL 33585	AHA	1 N	The second
6. The name and (if changed):	i street address of the new registered agent (if changed) and /or registered office	57 OF	至	
	Jackie A Croft	STATE	0 0:0	
	1125 Sunshine Ave	ED CF	ŧ.	
	(P.O. Box NOT acceptable)			
	Leesburg, FL 34748			
The street addr as changed will	ess of its registered office and the street address of the business office of its rebe identical.	gistered	agent,	,
Such change wauthorized by t	as authorized by resolution duly adopted by its board of directors or by an off he board, or the corporation has been notified in writing of the change.	icer so		
CSignat	ure of an officer or director) Jackie A Croft (Printed or typed name and title)	<u> </u>	<u> </u>	
I hereby accept I further agree of my duties, ar document is be corporation ha	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 completed I am familiar with and accept the obligation of my position as registered as ing filed merely to reflect a change in the registered office address, I hereby continued in writing of this change.	te perfoi zent. Or onfirm ti	rmanc ; if thi hat the	e S
Jacky	Crot 1-7-09 gnature of Registered Agent) (Date)			
If signing on be	chalf of an entity:			
	Typed or Printed Name)			

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