

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

10 JUN 25 AM 8:20

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE
COSTELLO FAMILY FOUNDATION, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
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RA/RO/chs
@ 6/28/10

2010 JUN 25 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COSTELLO FAMILY FOUNDATION, INC.
Name of Corporation

DOCUMENT NUMBER: N06000013088

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:

Jody Jones
Name of Contact Person

Capstone Financial Advisors, Inc.
Firm/Company

2001 Butlerfield Rd., Suite 1750
Address

Dowagers Grove, IL 60515
City/State and Zip Code

jjones@capstone-advisors.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jody Jones at (630) 241-0833
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

CR12045 (N05)

**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 FL
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: COSTELLO FAMILY FOUNDATION, INC.
2. The principal office address: 7000 WEST PALMETTO PARK ROAD, Suite 205, BOCA RATON, FL 33433 US
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/26/2006 Document number: ND6000013088
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)

MORRIS LAW GROUP

7000 WEST PALMETTO PARK ROAD, Suite 205

BOCA RATON, FL 33433 US

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

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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

Michael J. Ciskin President

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.

By: C T Corporation System
Bernadette McNamara

Signature of Registered Agent

06/25/10

Date

If signing on behalf of an entity:

Bernadette McNamara

Assistant Secretary

*** 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)

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STATE
SECRETARY OF FLORIDA
TALLAHASSEE
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