

No 7000006517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

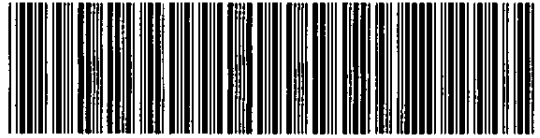
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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R.A. Chang

C.COULLETTE

AUG 20 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Stocking Hominid Research, Inc.
Name of Corporation

DOCUMENT NUMBER: N07000006517

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:

Diane Stocking
Name of Contact Person

Stocking Hominid Research, Inc.
Firm/Company

19855 River Road, Apt. F
Address

Gladstone, OR 97027
City/State and Zip Code

dstocking@stockinghominidr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diane Stocking at (321) 213-8440
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2009

DIANE STOCKING
STOCKING HOMINID RESEARCH, INC.
19855 RIVER RD., APT F
GLADSTONE, OR 97027

SUBJECT: STOCKING HOMINID RESEARCH, INC.
Ref. Number: N07000006517

We have received your document for STOCKING HOMINID RESEARCH, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 209A00026792

RECEIVED

2009 AUG 20 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. The name of the corporation: Stocking Hominid Research, Inc.

2. The principal office address: 421 Mendel Lane, Titusville, FL 32796

3. The mailing address (if different): same

4. Date of incorporation/qualification: 7/02/2007 Document number: N07000006517

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)

Donna Stocking

505 King Charles Cir.

Deland, FL 32724

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

Diane Stocking

421 Mendel Lane

P.O. Box NOT acceptable

Titusville, Florida 32796

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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.

Diane Stocking
Signature of an officer or director

Diane Stocking, Pres.
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.

Diane Stocking
Signature of Registered Agent

8/13/09
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