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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: THE NELSEN RESIDENCE INC. (Name of corporation)
DOCUMENT NUMBER: N93000002849
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:
CHRISTOPHET HRANEK (Name of contact person)
AGENT/GUARDIAN: THE NELSEN RESIDENCE, IN
2323 DEC PRADO Blud Ste#7 WNIT-31
CAPE COLAC FL. 33990 (239)443-0058
For further information concerning this matter, please call:
(Name of contact person) at (339) 939-4888 (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
409 E. Gaines Street
Tallahassee, FL 32399

LANCE McKINNEY

Attorney

Telephone: (239) 939-4888

Fort Myers, FL 33901

Www.osterhoutmckinney.com

## 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: THE NELSEN RESIDENCE, TNC
2. The principal office address: 2315 SE 15TH PIACE  CAPE CORAL FL 33900
3. The mailing address (if different): 2323 DEL PRADO BIVD. BIDG 7 UNIT 31  CAPE CORAL FL. 33990
4. Date of incorporation/qualification: 6/21/93 Document number: N 930000 2849
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
NELSEN, ELEANOR, M.
2307 SEISTH PLACE
CAPE CORAL FL. 33990 For & D
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
CHRISTOPHER J. HRANEK
2323 DEI PRADO BIUD. STE. 7 UNIT-311 (P.O. Box NOT acceptable)
CAPE CORAL FL. 33990
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.
Mistorphy Toronh CHRISTORDET J. HRANEK
I hereby accept the appointment as registered agent and agree to act in this capacity.  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 NELSEN 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.
Mass Type (Signapore of Registered Agent) 5/4/05 (Signapore of Registered Agent)
If signing on behalf of an entity:
CHRISTOPHET J. HRANEK POK: ELEANOR NELSEN
POX: ELEANOR NELSEN

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

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