



N97000004125

**Tampa Firefighters Museum**  
808 Zack Street  
Tampa, Florida 33602



000235183350

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

05/18/12--01009--004 \*\*35.00

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*RACH*  
MAY 23 2012  
C. MUSTAIN

**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 TAMPA FIREFIGHTERS MUSEUM, INC.
2. The principal office address: TAMPA FIREFIGHTERS MUSEUM  
720 E ZACK ST, TAMPA FL 33602
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 07/22/1997 Document number: N97000004125

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)

CFRA, LLC

100 S. ASHLEY DR., SUITE 400

TAMPA FL 33602 US

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

Jan J. Gorrie

Panza, Maurer & Maynard, P.A.

3600 N. Federal Highway, 3rd Floor

P.O. Box NOT acceptable

Ft. Lauderdale, FL 33308

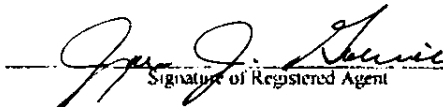
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.

 RANDALL JORDAN  
Signature of an officer or director

RANDALL JORDAN Board of Directors  
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.*

  
Signature of Registered Agent

5/10/2012  
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

CR2F045 (03/12)