

N97000006057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

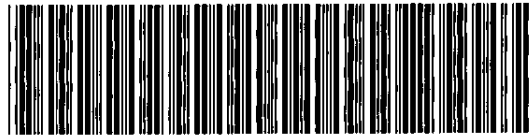
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400210264694

07/28/11--01002--001 **35.00

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2011 JUL 27 PM 2:32
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

R.A. Chg.
C.COULLIETTE
JUL 27 2011
EXAMINER

FILED
11 JUL 27 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Florida Property and Casualty Association, Inc.
Name of Corporation

DOCUMENT NUMBER: N97000006057

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:

Nicole Fried
Name of Contact Person

Colodny, Fass, Talenfeld, Karlinsky & Abate
Firm/Company

100 SE 3rd Ave, 23rd Floor
Address

Fort Lauderdale, Florida 33394
City/State and Zip Code

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

For further information concerning this matter, please call:

Nicole Fried at (954) 332-1747
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

**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: Florida Property and Casualty Association, Inc.
2. The principal office address: 215 S. Monroe Street, Suite 701
Tallahassee, Florida 32301
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1997 Document number: N97000006057

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)

Charles J. Grimsley, Esq.
3909 NE 163rd Street, Suite 304
North Miami Beach, Florida 33160

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

Katherine Webb Scott, Esq.
215 S. Monroe Street, Suite 701
P.O. Box NOT acceptable
Tallahassee, Florida 32301

FILED
11 JUL 27 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Charles J. Grimsley
Signature of an officer or director

Charles J. Grimsley, Esq., 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.

[Signature]
Signature of Registered Agent

7/27/11
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
CR2E045 (8/05)