

P00000008053

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*R.A. Change*

C. Goulette APR 09 2007



**CSC.**

CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 770164 7515113

AUTHORIZATION

COST LIMIT : \$35.00

ORDER DATE : February 21, 2007

ORDER TIME : 9:48 AM

ORDER NO. : 770164-050

CUSTOMER NO: 7515113

CHANGE OF AGENT

NAME: PROFESSIONAL MANAGEMENT OF  
CENTRAL FLORIDA, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Cindy Harris -- EXT# 2937

EXAMINER: \_\_\_\_\_

**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: PROFESSIONAL MANAGEMENT OF CENTRAL FLORIDA, INC.
2. The principal office address: 707 Mendham Boulevard, Suite 201, Orlando, FL 32825
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 01/25/2000 Document number: P00000008053
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Louis Vogt

707 Mendham Boulevard, Suite 201

Orlando, FL 32825

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

Corporation Service Company

1201 Hays Street

(P.O. Box NOT acceptable)

Tallahassee, FL 32301

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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.

Maureen Cullen  
(Signature of an officer or director)

Maureen Cullen, Attorney in Fact  
(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.*

Corporation Service Company

By Sylvia J. Queppet  
(Signature of Registered Agent)

April 2, 2007

(Date)

If signing on behalf of an entity:

Sylvia J. Queppet, Assistant VP  
(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