## P0000011841

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SECRETARY OF STATE DIVISION OF CORPORATIONS

R.A. E. R.A. 1-9-2003

## TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

RE: ASAP RECOVERY, INC.

Document No. P00000111841

The enclosed Statement of Change of Registered Agent for a corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gary Towne 1104 Oak Drive Leesburg, FL 34748

 For further information concerning this matter, please call Carol W. Richards at (352) 343-1372.

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Carol W. Richards

Sincerely,

## SECRETARY OF STATE OF STATE OF CORPORATIONS

## STATEMENT OF CHANGE OF REGISTERED AGENT FOR CORPORATIONS

Pursuant to the provisions of Sections 607.0502(2), 617.0502(2), 607.1508, or 617.1508, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered agent in the State of Florida:

- 1. Name of corporation: ASAP RECOVERY, INC.
- 2. The principal office address: 1104 Oak Drive, Leesburg, FL 34748
- The mailing address (if different): N/A.
- 4. Date of incorporation and document number: December 1, 2000; Document Number: P00000111841.
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: Carol W. Richards, 1104 Oak Drive, Leesburg, FL 34748
- 6. The name and street address of the new registered agent: Gary Towne. 1104 Oak Drive, Leesburg, FL 34748

The street address of its registered office and the street address of the business office of its registered agent, are identical and remain unchanged.

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.

signature of officer of the board

Print 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 Reg. Agent

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Filing Fee: \$35.00 made payable to Florida Department of State

and mail to:

Amendment Section
Division of Corporations

P.O. Box 6326

Tallahassee, FL 32314