## P00000112825

| (Req                       | uestor's Name)  |             |
|----------------------------|-----------------|-------------|
| (Add                       | ress)           |             |
| (Add                       | ress)           |             |
| (City/                     | /State/Zip/Phon | e #)        |
| PICK-UP                    | ☐ WAIT          | MAIL        |
| (Busi                      | iness Entity Na | me)         |
| (Doc                       | ument Number    | )           |
| Certified Copies           | Certificate     | s of Status |
| Special Instructions to Fi | ling Officer:   |             |
|                            |                 |             |
|                            |                 |             |
|                            |                 |             |





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02/11/08--01027--012 \*\*35.00



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## **COVER LETTER**

SUBJECT: Tropical Sun Chasers, Troc (Name of Corporation)

DOCUMENT NUMBER: POOOOO 11 8 8 3 5

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:

Debra P. Goettsch

(Name of Contact Person)

Tropical Sun Chasers, Inc

(Firm/Company)

512 Aaron Circle Drive

(Address)

Durham MC 27713

For further information concerning this matter, please call:

Debra P. Goettsch at (99 361-2083 (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

TO:

Amendment Section Division of Corporations



February 13, 2008

DEBRA P GOETTSCH 512 AARON CIR DR DURHAM, NC 27713

SUBJECT: TROPICAL SUN CHASERS, INC.

Ref. Number: P00000112825

We have received your document for TROPICAL SUN CHASERS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith Document Specialist

Letter Number: 208A00009423

SECRETARY OF STATE ADISORATE TALL AHASSEE: FLORIO A

3008 FEB 25 AM 8: 00

RECEIVED

## 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: Tropical Sun Chasers Inc.   |
| 2. The principal office address: 512 Agron Circle Drive   |
| Durham, NC 27713  |
| 3. The mailing address (if different):  |
| 4. Date of incorporation/qualification:   |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  |
| Debra Goettsch  |
| 1175 Pactorie Rd.   |
| Daytona Blach, Fr 32/14   |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):   |
| Nancy Malia   |
| 1733 Windsong Curcle 5  |
| Flagler Beach, FL 32136   |
| 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.   |
| (Signature of an offiger or director)  Richard T. Gottsch VP  (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. |
| Management 2-21-08 (Signature of Registered Agent) (Date)   |
| If signing on behalf of an entity:  |
| (Typed or Printed Name)   |

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