

PO1000049535

(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

9.27.10



600185714676

600185714676  
09/24/10--01019--015 \*\*\$5.00

2010 SEP 27 AM 10:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

PA  
C  
S

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** WALLIS & WALLIS, P.A.  
Name of Corporation

**DOCUMENT NUMBER:** P01000049535

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:

JOAN MARTINO WALLIS  
Name of Contact Person

WALLIS & WALLIS, P.A.  
Firm/Company

1600 S. FEDERAL HIGHWAY, SUITE 470  
Address

POMPANO BEACH, FL 33062  
City/State and Zip Code

JOAN@WALLISANDWALLIS.NET  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOAN MARTINO WALLIS at ( 954 ) 941-9005  
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: WALLIS & WALLIS, P.A.
2. The principal office address: 1600 S. FEDERAL HIGHWAY, SUITE 470  
POMPANO BEACH, FL 33062
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: MAY 17, 2001 Document number: P01000049535
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)

PETER WALLIS  
1600 S. FEDERAL HIGHWAY, SUITE 600  
POMPANO BEACH, FL 33062

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

PETER WALLIS  
1600 S. FEDERAL HIGHWAY, SUITE 470  
P.O. Box NOT acceptable  
POMPANO BEACH, FL 33062

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2010 SEP 24 AM 10:12  
FILED

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.

Joan M Wallis  
Signature of an officer or director

JOAN M WALLIS  
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

9/20/10  
Date

If signing on behalf of an entity:

PETER E. S. WALLIS  
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