

P01000067851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: David Cramer P.A.
(Name of corporation)

DOCUMENT NUMBER: PO1000067851

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:

David Cramer
(Name of contact person)

David Cramer P.A.
(Firm/Company)

6985 Wallace Road
(Address)

Orlando FL 32819
(City/state and zip code)

For further information concerning this matter, please call:

DAVID CRAMER at (407) 352-7788
(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
409 E. Gaines Street
Tallahassee, FL 32399

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: David Cramer P.A.
2. The principal office address: 6985 Wallace Rd Orlando FL 32819
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7/10/2001 Document number: PD1000067851
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

David Cramer
7575 Dr. Phillips Blvd. Ste. 170
Orlando FL 32819

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

David Cramer
6985 Wallace Rd
(P.O. Box NOT acceptable)
Orlando FL 32819

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TALLAHASSEE, FL 32314

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.

David Cramer
(Signature of an officer or director)

David Cramer
(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.

David Cramer
(Signature of Registered Agent)

8/31/05
(Date)

If signing on behalf of an entity:

David Cramer
(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