

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note:** Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000279342 3)))



H120002793423ABC/

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
AMERICAN CLASSIC AGENCY, CORP.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RECEIVED

12 NOV 28 AM 8:11

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*PA RCH*

Electronic Filing Menu

Corporate Filing Menu

Help

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: AMERICAN CLASSIC AGENCY, CORP.

Name of Corporation

DOCUMENT NUMBER: P01000081479

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:

Kelley Bost

Name of Contact Person

AMERICAN CLASSIC AGENCY, CORP.

Firm/Company

201 ATP Tour Blvd

Address

Ponte Vedra Beach, FL 32082

City/State and Zip Code

khost@aclassic.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard Siclicki

904

285-4030

Name of Contact Person

at

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

CR2B043 (03/12)

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: AMERICAN CLASSIC AGENCY, CORP.
2. The principal office address: 201 ATP TOUR BLVD, PONTE VEDRA BEACH, FL 32082
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 08/17/2001 Document number: P01000081479
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)

LESNICK, IRVING I

1200 N. FEDERAL HWY, SUITE 200

BOCA RATON FL 33432-2845

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

CT Corporation System

c/o CT Corporation System, 1200 South Pine Island Road Plantation,

P.O. Box NOT acceptable

Florida 33324

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.

Kelley R Bost  
Signature of an officer or director

Kelley R Bost  
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.

CT Corporation System

By Madonna Cuddihy  
Signature of Registered Agent

11-27-12  
Date

If signing on behalf of an entity:

Madonna Cuddihy  
Typed or Printed Name  
**Special Assistant Secretary**

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

FD-006 - 05/16/2012 Webform E-Form Online