P01000083393

	(Requestor's Name)	
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	(City/State/Zip/Phone #)	
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	(Business Entity Name)	
	(Document Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: TRUE CRAFT CONTRACTING CO.

(Name of corporation)

DOCUMENT NUMBER: P01000083393

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:

TODD A. SMITH

(Name of contact person)

TRUE CRAFT CONTRACTING CO. (Firm/Company)

5876 FISHHAWK RIDGE DRIVE BOX 60 (Address)

LITHIA, FL 33547

(City/state and zip code)

For further information concerning this matter, please call:

TODD A. SMITH	at (813) 760-4053
(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

- 1. The name of the corporation: TRUE CRAFT CONTRACTING CO.
- 2. The principal office address: 5876 FISHHAWK RIDGE DR. BOX 60

LITHIA, FL 33547

3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 08-22-01

Document number: P01000083393

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5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

DONNA L. SMITH

4124 TYNDALE DRIVE

BRANDON, FL 33511

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

TODD A. SMITH

5876 FISHHAWK RIDGE DR. BOX 60

(P.O. Box NOT acceptable)

LITHIA, FL 33547

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.

officer or director)

TODD A. SMITH, PRESIDENT (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 accument is being filed mereby to reflect a change in the registered office address, I hereby confirm that the corporation has been polited in writing of this change.

stered Agent)

If signing on behalf of an entity:

(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 TALLAHASSEF FL 32314