

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : UCC FILING & SEARCH SERVICES, INC
Account Number : I19980000054
Phone : (850) 681-6528
Fax Number : (850) 681-6011

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

Email Address: LFEDRO@STU.EDU

**REGISTERED AGENT CHANGE
LARRY C. FEDRO & ASSOCIATES, P.A.**

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**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: LARRY C. FEDRO & ASSOCIATES, P.A.
2. The principal office address: 704 NW 163 RD AE, PEMBROKE PINES FL 33028
3. The mailing address (if different): P.O. BOX 260868, PEMBROKE PINES FL 33026
4. Date of incorporation/qualification: 04/18/2002 Document number: P02000042086
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)

UCC FILING & SEARCH SERVICES, INC.

1574 VILLAGE SQUARE BLVD STE 100

TALLAHASSEE FL 32309

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

LARRY C FEDRO

704 NW 163 RD AVE.

P.O. Box NOT acceptable

PEMBROKE PINES FL 33028

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.

Larry C Fedro President LARRY C FEDRO, PRESIDENT
Signature of an officer or director 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.

Larry C Fedro
Signature of Registered Agent

3/19/10
Date

If signing on behalf of an entity:

LARRY FEDRO
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
CR2E045 (8/05)

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