

PO2000064780

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

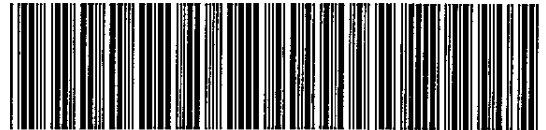
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

5/4/04
G. Mont Williams
Advised to correct
RA Name to reflect
our records and to
change Pamela to Pam
AS well...

Office Use Only

RA
RO Change
(10) 5/4/04



700033435827

04/26/04--01068--009 **35.00

FILED

04 APR 26 PM 4:30

CLERK OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Williams Printing, INC.
(Name of corporation)

DOCUMENT NUMBER: PO2000064780

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:

G. Mont Williams
(Name of person)

Williams Printing, INC. dba Minuteman Press
(Name of firm/company)

1237 AIRPORT ROAD SOUTH
(Address)

NAPLES, Florida 34104
(City/state and zip code)

For further information concerning this matter, please call:

G. Mont Williams at (239) 261-1198
(Name of 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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Williams Printing, Inc.
2. The principal office address: 1237 Airport Road South
NAPLES, Florida 34104
3. The mailing address (if different): _____

4. Date of incorporation/qualification: June 12, 2002 Document number: P02000064780

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

Pamela Williams
87 N. Collier Blvd. #G2
MARCO ISLAND, Florida 34145

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

Pam Williams
1237 Airport Road South
(P.O. Box or personal mailbox NOT acceptable)
NAPLES, Florida 34104

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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.

[Signature]
(Signature of an officer or director)

G. Mont Williams, 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 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)

April 21, 2004
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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

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