

P02000072650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

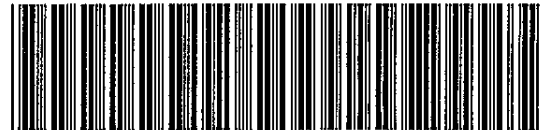
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Brad Taylor GAVE
AUTHORIZATION BY PHONE TO
CORRECT Current RA Address
DATE 12/20/02
DOC. EXAM 1a

Office Use Only

RA/RO Change
(1a) 12/23/02



000009302140

12/12/02--01050--008 **35.00

FILED
02 DEC 12 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRAD SAND, INC. DBA HOME INSTEAD SENIOR CARE
(Name of corporation)

DOCUMENT NUMBER: 702000072650

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:

BRAD TAYLOR
(Name of person)

BRAD SAND, INC DBA HOME INSTEAD SENIOR CARE
(Name of firm/company)

3800 S. TAMMAM TRAIL, STE. 314
(Address)

SARASOTA FL 34239
(City/state and zip code)

For further information concerning this matter, please call:

BRAD TAYLOR at (941) 951-2242
(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

**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: BRAD SAND, INC.
2. The principal office address: 3800 S TAMiami TRAIL, STE. 314 SARASOTA
FL 34239
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7-2-02 Document number: P02000072650
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
BUSINESS FILINGS INCORPORATED
1000 West Ave - Ste. 1114
Miami Bch, FL 33139
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
HOME INSTEAD SENIOR CARE
3800 S. TAMiami TRAIL, STE. 314
(P.O. Box or personal mailbox NOT acceptable)
SARASOTA FL 34239

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, chairman or vice chairman of the board)

BRAD TAYLOR, VP
(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)

12-10-02
(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 AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILED
02 DEC 12 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA