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Whom

COVER LETTER

TO: Ame Divi	endment Section sistement of Corporations		
SUBJECT:	Jeffrey C. Fulford, P.A. (Name of Corpo	oration)	_
DOCUMEN	NT NUMBER: P02000123053		_
The enclosed	d Statement of Change of Registered Office/Ag	gent and fee are submitted for	filing.
Please return	all correspondence concerning this matter to t	he following:	
			,
	Jeffrey C. Fulford		_
	(Name of Contact	Person)	
	Jeffrey C. Fulford, P.A.		_ > c 💍
	(Firm/Compa	any)	
			OB HAY 27 PH 12: 27
	32 Southeast Osceola Street,		
	(Address))	27 PHI2: 27 ARY OF STATE SSEE, FLORID
			اران الاران
	Stuart, Florida 34994 (City/State and Z	in Code)	23
D C .1 1	` •	ip code)	T- "
For further in	nformation concerning this matter, please call:		
Jeffrey C. F	ulford a	(772) 288-5123 (Area Code & Daytime Tel	
	(Name of Contact Person)	(Area Code & Daytime Tel	ephone Number)
Enclosed is a	a \$35.00 check made payable to the Departmer	at of State.	
	25 W	G(
	Mailing Address: Amendment Section	Street Address: Amendment Section	
	Division of Corporations	Division of Corporati	ons
	P.O. Box 6327	Clifton Building	
	Tallahassee, FL 32314	2661 Executive Cente	
		Tallahassee, FL 3230	I

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.	
	ne corporation: Jeffrey C. Fulford, P.A.	
2. The principal of	office address: 32 Southeast Osceola Street , Suite A Stuart, FL 34994	
3. The mailing ad	Idress (if different): same	
4. Date of incorp	oration/qualification: 2002 Document number: P02000123053	
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the ment of State:	
	Jeffrey C. Fulford	
	900 South Federal Highway, Suite 100	
	Stuart, FL 34994	
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	
	Jeffrey C. Fulford	
	32 Southeast Osceola Street, Suite A	
,	(P.O. Box NOT acceptable)	
,	Stuart, FL 34994	
The street address as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.	
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.	
Toffver (Fulford Pres. (Printed or typed name and title)		
I hereby accept to I further agree to of my duties, and document is beir	the appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete performance of a statute of the proper and complete performance of a statute of the proper and complete performance of a statute of the proper and complete performance of the proper and complete performance of the proper and complete of this appear that the been notified in writing of this change.	
M	ey (Just and 5-22-08 nature of Registered Agent) (Date)	
If signing on bel	ℓ	
Jeffrey (yped or Printed Name)	

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