

A03000019842

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Home-Ox  
(Name of corporation)

DOCUMENT NUMBER: P03000019842

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:

JAMES M LOFTIS Sr.  
(Name of person)

Home-Ox  
(Name of firm/company)

90 1st Street SW.  
(Address)

Winter Haven, FL 34786  
(City/state and zip code)

For further information concerning this matter, please call:

Chuck Turner at ( 843 ) 573-0099  
(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

HOME-OX, INC.

90 1st Street sw  
Winter Haven, FL 33880

863-294-8105  
Fax 294-9255

03/20/03

To whom it may concern:

This is a request to change the principal and mailing address of HOME-OX, INC enclosed is a statement of change for this request . Also enclosed is a statement of change for the address of the principal agent.

  
Paul St.

**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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

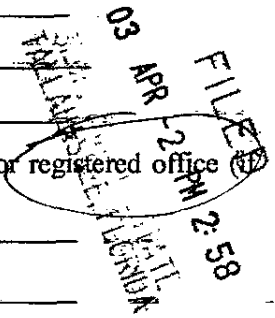
1. The name of the corporation: Home-Ox inc.  
2. The principal office address: 414 Forrest Street  
Windermere, FL 34786  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 2/14/2003 Document number: P03000019842  
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Loftis James M Sr.  
414 Forest St.  
WinderMere FL 34786

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

90 1st Street SW  
Winter Haven, FL 33880  
(P.O. Box or personal mailbox NOT acceptable)



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 of an officer, chairman or vice chairman of the board)

(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)

3/20/2003  
(Date)

If signing on behalf of an entity:

James M. Loftis Sr.  
(Typed or Printed Name)

[Signature]  
(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