

P03000044886

(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:

Sally Daw Advised
to put RA information
on the Form.

Office Use Only

RA/change
@ 1/6/05



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12/20/04--01026--021 **35.00

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05 JAN -6 PM 1:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A-1 REALTY OF BREVARD, INC.
(Name of corporation)

DOCUMENT NUMBER: P-03000044886

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:

SALLY KARINA DAW
(Name of contact person)

A-1 REALTY OF BREVARD
(Firm/Company)

4301 KIMBERLY CIRCLE
(Address)

WEST MELBOURNE, FL 32904
(City/state and zip code)

For further information concerning this matter, please call:

SALLY KARINA DAW

(Name of contact person)

at (321) 724-1100

(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

FILED
05 JAN -6 PM 1:05
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

December 29, 2004

SALLY KARINA DAW
A-1 REALTY OF BREVARD, INC.
4301 KIMBERLY CIRCLE
WEST MELBOURNE, FL 32904

SUBJECT: A-1 REALTY OF BREVARD, INC.
Ref. Number: P03000044886

We have received your document for A-1 REALTY OF BREVARD, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

You failed to list the new registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 404A00071921

My cell Phone # 321-243-9757

RECEIVED
05 JAN -6 AM 11:53
DIVISION OF CORPORATIONS

**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: A-1 REALTY OF BREVARD INC
2. The principal office address: 4301 KIMBERLY CIRCLE
WEST MELBOURNE, FL 32904
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/22/2003 Document number: P030000044886

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

Charles C. Wells
4301 KIMBERLY CIRCLE
WEST MELBOURNE, FL 32904

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05 JAN -6 PM 1:05
TALLAHASSEE, FLORIDA

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

SALLY KARINA DAW
4301 KIMBERLY CIRCLE
WEST MELBOURNE, FL 32904
(P.O. Box 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]
(Signature of an officer or director)

DEULEY D. DAW, V.P.
(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)

12/16/2004 Telephonic
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

321-243-975

1/4/05

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

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