P03000049898

1	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	: :
(Document Number)	
Certified Copies Certificates of	Status
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SECRETARY OF STATE
AFLAHASSEE, FLORIDA

RAChg.

15 9/5

COVER LETTER

Division of Co	rporations	
SUBJECT: FREEPON	RT SHIPBUILDING HULL #267,	INC.
	(Name of co	orporation)
DOCUMENT NUMB	ER: P03000049898	
The enclosed Statemen	t of Change of Registered Office	Agent and fee are submitted for filing.
Please return all corres	pondence concerning this matter	to the following:
		J
/AL	MES M. MURRAY	
	(Name of con	tact person)
	:	
FREEP	ORT SHIPBUILDING HULL #26	
	(Firm/Co	mpany)
116 5	SHIPYARD ROAD, PO BOX 49 (Addi	race)
	; (Addi	ess)
	255007 EL 20400	
	REEPORT FL 32439 (City/state ar	d zip code)
For further information	concerning this matter, please c	•
ror futther information	concerning this matter, piease e	uit,
JAMES M. MURRAY		at (850) 835-4125
(Name o	of contact person)	(Area code & daytime telephone number)
Enclosed is a \$35.00 ch	neck made payable to the Depart	ment of State.
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporations P.O. Box 6327	Division of Corporations 409 E. Gaines Street
	Tallahassee, FL 32314	Tallahassee, FL 32399

CR2E045(6/04)

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

=	sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, thi ted for a corporation organized under the laws of the State of FLORIDA	is
l l	s registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation	n: FREEPORT SHIPBUILDING HULL #267, INC.	包公
	: 116 SHIPYARD ROAD, FREEPORT, FL 32439	52
		- S
3. The mailing address (if diff	erent): P.O. BOX 49, FREEPORT, FL 32439	<u>,</u>
4 Date of incorporation/quality	Tication: 05/06/2003 Document number: P03000049898	
	s of the current registered agent and registered office on file with the	·
DANIEL C. F	ERRI	
4 ELEVENTI	AVENUE, SUITE1	
SHALIMAR,	FL 32579	
The name and street address (if changed):JAMES M. M.	of the new registered agent (if changed) and /or registered office	
116 SHIPYA		
110 3011-174	(P.O. Box NOT acceptable)	
FREEPORT,	FL 32439	
The street address of its regis as changed will be identical.	tered office and the street address of the business office of its registered	l agent,
Such change was authorized lauthorized by the board, or the	by resolution duly adopted by its board of directors or by an officer so e corporation has been notified in writing of the change.	
James M Mu	JAMES M. MURRAY, PRESIDENT	
(Signature of an officer or a life of the control of the comply with of my duties, and I am familia document is being filed merel corporation has been notified	ent as registered agent and agree to act in this capacity. In the provisions of all statutes relative to the proper and complete perform with and accept the obligation of my position as registered agent. Only to reflect a change in the registered office address, I hereby confirm the in writing of this change.	rmance r, if this that the
Janeso W. M.	08/27/2004	
(Signature of Registere		
(Typed or Printed Na	me)	

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

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