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| Special Instructions to | Filing Officer: | | |
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R.A. Change

TB 6/16/08

COVER LETTER

| Division of Corporations | | | | | | |
|---|--|--|--|--|--|--|
| SUBJECT: FRANK J. GRECO, P.A. (Name of Corporation) | | | | | | |
| DOCUMENT NUMBER: P0300069603 | | | | | | |
| 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: | | | | | | |
| Trouble fortain an correspondence concerning this matter to the fortexing. | | | | | | |
| FRANK J. GR-ECO . (Name of Contact Person) | | | | | | |
| (Name of Contact Person) | | | | | | |
| | | | | | | |
| FRANK J. GRECO PA (Firm/Company) | | | | | | |
| (Firm/Company) | | | | | | |
| | | | | | | |
| 708 SOUTH CHURCH AUSNUE | | | | | | |
| (Address) | | | | | | |
| TAMPA FLORIDA 33609 | | | | | | |
| (City/State and Zip Code) | | | | | | |
| For further information concerning this matter, please call: | | | | | | |
| | | | | | | |
| (Name of Contact Person) at (S13) 287-0550 (Area Code & Daytime Telephone Number) | | | | | | |
| (Name of Contact Person) (Area Code & Daytine Telephone Number) | | | | | | |
| Enclosed is a \$35.00 check made payable to the Department of State. | | | | | | |
| | | | | | | |
| Mailing Address: Street Address: | | | | | | |
| Amendment Section Amendment Section | | | | | | |
| Division of Corporations Division of Corporations Division of Corporations | | | | | | |
| P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle | | | | | | |
| Tallahassee, FL 32314 Zoof Executive Center Circle Tallahassee, FL 32301 | | | | | | |



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

June 10, 2008

FRANK J. GRECO, P.A. 708 S CHURCH AVE TAMPA, FL 33609

SUBJECT: FRANK J. GRECO, P.A. Ref. Number: P03000069603

We have received your document for FRANK J. GRECO, P.A. 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 are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 908A00035664

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

| statement of chang | ovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida State te is submitted for a corporation organized under the laws of the State of o change its registered office or registered agent, or both, in the State of Flori | WR | | <u>-</u> | |
|--|---|--------------|----------------------------------|-----------------|--|
| 1. The name of the | corporation: FRANK J. GRACO, P.A. | | | | |
| 2. The principal of | fice address: 708 SOUTH CHURCH AUEI | NU | $\underline{\varepsilon}$ | | |
| TAMP | PA, FLOREDA 33609 | | | | |
| 3. The mailing add | ress (if different): SAME | | | | |
| | | | | | |
| 4. Date of incorpor | ration/qualification: <u>6 20 2003</u> Document number: <u>PO 3 O (</u> | <u>900</u> | 690 | 203 | |
| 5. The name and st Florida Departm | reet address of the current registered agent and registered office on file with the ent of State: | he | | | |
| _ | FRANK J. GRECO ESQ. | | | , | |
| | 4047 HENDERSON BLUD, | | | | |
| _ | TAMPA, FLORIDA 33629 | 1 2 2 | 20 | | |
| 6. The name and st (if changed): | reet address of the new registered agent (if changed) and /or registered office | SECRETAI | 1 NUL 8002 | 777 | |
| | FRANK J. GRECO | SEE O | ъ О | m | |
| _ | 708 SOUTH CHURCH AVENUE (P.O. Box NOT acceptable) | FLC | PM 3: | O | |
| | TAMPA, FLORIDA 33609 | RICA | 04: | | |
| 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 a | authorized by resolution duly adopted by its board of directors or by an off board, or the corporation has been notified in writing of the change. | ficer so |) | | |
| | FLANK J. G. C. C. (Printed or typed name and title) | 0 | | | |
| I hereby accept the I further agree to do of my duties, and I datument is being | cappointment as registered agent and agree to act in this capacity. Comply with the provisions of all statutes relative to the proper and complet am familiar with and accept the obligation of my position as registered as filed merely to reflect a change in the registered office address, I hereby ceen notified in writing of this change. | | forman Or, if th 1 that th | ce iis ie | |
| Signal | ure of Registrope Agent) (Date) | , | | , | |
| If signing on behal | If of an entity: | | | | |
| Frank J | , Greco, do r Printed Name) | | | | |

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