

P03000/00567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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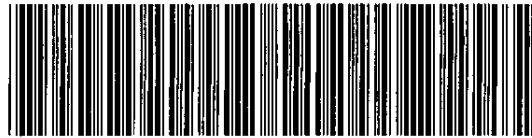
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

NO Change
Theris
6-4-09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Stuart S. Webster, P.A.
(Name of Corporation)

DOCUMENT NUMBER: P03000100567

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:

Stuart Webster
(Name of Contact Person)

Stuart S. Webster, P.A.
(Firm/Company)

3603 Cardinal Point Drive
(Address)

Jacksonville/ Florida 32257
(City/State and Zip Code)

For further information concerning this matter, please call:

Stuart Webster at (904) 753 3815
(Name of Contact 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 APR 29 AM 8:00

RECEIVED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 30, 2009

STUART S. WEBSTER
STUART S. WEBSTER, P.A.
3603 CARDINAL POINT DRIVE
JACKSONVILLE, FL 32257

SUBJECT: STUART S. WEBSTER, P.A.
Ref. Number: P03000100567

We have received your document for STUART S. WEBSTER, P.A., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 509A00014589

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2009 MAY 29 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Stuart S. Webster, P.A.
2. The principal office address: 3603 Cardinal Point Drive,
Jacksonville FL 32257
3. The mailing address (if different): 634 Piney Island Drive
Fernandina Beach FL 32034
4. Date of incorporation/qualification: _____ Document number: P03000100567
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Stuart S. Webster

234 OCEANWAY AVENUE

JACKSONVILLE FL 32218

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

3603 Cardinal Point Drive

(P.O. Box NOT acceptable)

Jacksonville FL 32257

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TALLAHASSEE, FLORIDA

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 or director)

Stuart S Webster
(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 of Registered Agent)

(Date)

If signing on behalf of an entity:

alkfjsaldfj
(Typed or Printed Name)

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