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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: H. J. CORBETT & ABSCCIATES, Luc.
(Name of Corporation)

DOCUMENT NUMBER: POBOO/45 Z 95

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:

HARLY J. CORBETT
/(Name of Contact Person)

H. J. CORBETT & ASSOCIATES, Luc.
(Firm/Company)

/// St. Johns Forest Bund.
(Address)

JACKSON VILLE FL BZZ 59

(City/State and Zip Code)

For further information concerning this matter, please call:

HARLY J. CABETT

at (904) 347-1866
(Name of Contact Person)

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

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: H.J. CORBETT & ASSOCIATES, INC.
2. The principal office address: 177 St. Johns FOREST BUD.
TACKSONVILE, FL 32259
3. The mailing address (if different):
4. Date of incorporation/qualification: 17 1 2003 Document number: P03000145295
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
1740 SouthSIDE BWD-, ZSOZ
M40 Southside BWD. ZSOZ FACKSONVILLE, FL 32256
ACC SO
6. The name and street address of the new registered agent (if changed) and /or registered office.
(if changed):
- MANATOKEST DWD. For -
JACKSONVILLE, FL 30259 37 5
(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 of the corporation has been notified in writing of the change.
authorized by the board of the corporation has been notified in writing of the change.
(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 feen notified in writing of this change.
corporation has then notified in writing of this change.
Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)