P03000146918

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04 DEC -3 PH 4: 40

SECWETARY OF STATE
TALLAHASSEE, FLOBIC

Enclosed please find a check in the amount of \$70.00 in order to file the also enclosed <u>Statement of Change of Registered Office or Registered Agent</u> and <u>Articles of Dissolution</u> for C. A. Hurst and Associates, Inc., Document # PO3000146918.

Please stamp the enclosed photocopies with the filing information and return them to me in the self-addressed, stamped envelope.

Thank you,

Chris Ann Hurst

905 Kingscote Court

Safety Harbor, FL 34695

727-791-8392

DEC -3 PM 4+4 NETARY OF STAT

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

	•	617.0502, 607.1508, or 617.1508, Florida Stati	utes,
	-	tion organized under the laws of the State of tered office or registered agent, or both, in the S	State
<i>of Florida.</i> 1. The name of	the corporation: C.A. +	turst And Associates. Inc	_
2. The principal	l office address: 905 K	lingscote Cf.	
	Sabet	j Harbon FL 34695	
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: Dec. 5	, 2003 Document number: P03000	146918
	rtment of State:	ered agent and registered office on file with the	
	Corporation Se	Street LE FL 3230 SEE	3
	1201 Hays	Street File	3 11
	Tallahass	ervice Company Street ee FL 3230 EE	L E
6. The name and changed):	nd street address of the new registe	ered agent (if changed) and /or registered office	FILED FILED
	90 E U	Driver de C-t	
•	(P.O. Box or personal m	ingscote Ct.	
,	Susty +	Horbor, FL 34695	
-	ess of its registered office and the s ged will be identical.	treet address of the business office of its registe	
Such change wa authorized by the	as authorized by resolution duly add he board, or the corporation has bee	opted by its board of directors or by an officer sen notified in writing of the change.	ю
Pui (Em Dut	Chris Ann Hurst (Printed or typed name and title)	
I hereby accept I further agree performance of registered agen office address,	t the appointment as registered age to comply with the provisions of all my duties, and I am familiar with ant. Or, if this document is being file I hereby confirm that the corporati	ent and agree to act in this capacity. If statutes relative to the proper and complete and accept the obligation of my position as ed merely to reflect a change in the registered ion has been notified in writing of this change.	
s) If signing on behal	Signature of Registered Agent)	(- 11-1)	
	s Ann Hurst	President Directo	~
(Typed or Printed Name)	(Capacity)	

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