P03000148755

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: James Pratt Jn. gave authorization to list him as RA. 7/23 7/8				
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SECRETARY OF STATE
AN LANASSEE. FLORIDA

RA Chq.

COVER LETTER

TO: A	Amendment Section Division of Corporations	
SUBJEC	T: Gulfside Tradesmen inc. (Name of c	orporation)
DOCUM	ENT NUMBER: P03000148755	
The enclo	osed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please ret	turn all correspondence concerning this matte	r to the following:
	James L Pratt jr (Name of co	ntact person)
	Gulfside Tradesmen inc. (Firm/C	ompany)
	8265 Chesebro Ave. (Add	ress)
	North Port Fl. 34287	nd zip code)
For further	er information concerning this matter, please	•
James L I		at (941) 815 -1883 (Area code & daytime telephone number)
	(Name of contact person)	(Area code & daytime telephone number)
Enclosed	is a \$35.00 check made payable to the Depar	ment of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

statement of ch	e provisions of sections 607.0502, 617.0502, nange is submitted for a corporation organiz der to change its registered office or registere				
1 The name of	f the corporation: Gulfside Tradesmen inc.				
2. The principa	. The principal office address: 8256 Chesebro Ave. North Port Fl. 34287				
3. The mailing	address (if different):				
4. Date of incom	rporation/qualification: 12/10/2003	Document number: P03000148755			
	nd street address of the current registered age artment of State:	ent and registered office on file with the			
BUSINESS FILINGS INCORPORATED					
	ALCR JU				
	TALLAHASSEE FL 32301	HASS A			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):					
	8256 Chesebro ave				
	(P.O. Box NOT acceptable) North Port FI. 34287	,			
The street addi	ress of its registered office and the street ac il be identical.	ddress of the business office of its registered agent,			
Such change wanthorized by	vas authorized by resolution duly adopted the board, or the corporation has been noti	by its board of directors or by an officer so field in writing of the change.			
James	Line of an other production	James L Pratt jr / President (Printed or typed name and title)			
oj my auties, a document is be	of the appointment as registered agent and to comply with the provisions of all statut and I am familiar with and accept the oblig eing filed merely to reflect a change in the as been notified in writing of this change.	agree to act in this capacity. es relative to the proper and complete performance ation of my position as registered agent. Or, if this registered office address, I hereby confirm that the			
lams	o Pourt PM	July / 15 / 2003			
If signing on b	ignature of Registered Agent) ochalf of an entity:	(Date)			
James L Pratt	-				

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