P04000024063

(Re	equestor's Name)	
. (Ad	ldress)	
(Ac	ddress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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TENDY OF CORPORATION

R.A.

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T. BROWN

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT. TOULON COMMUNITY DEVELOPERS, INC.

Name of Corporation

DOCUMENT NUMBER: P04000024063

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:

Keith Buescher

Name of Contact Person

TOULON COMMUNITY DEVELOPERS, INC.

Firm/Company

2060 N. HWY A1A, Suite 308

Address

Indian Harbour Beach, FL 32937

City/State and Zip Code

Keith@mercedespremier.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Keith Buescher

, 321

310-3924

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

CR2E045 (03/12)

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

statement of cha	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida are to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: TOULON COMMUNITY DEVELOPERS, INC.
2. The principal	office address: 2060 N. HWY A1A, Suite 308
	arbour Beach, FL 32937
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: 02/03/2004 Document number: P04000024063
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Keith Buescher
	6905 N. Wickham Road, Suite 303
	Melbourne, FL 32940
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	2060 N. HWY A1A, Suite 308
	P.O. Box NOT acceptable
	Indian Harbour Beach, FL 32937
The street addr	ess of its registered office and the street address of the business office of its registered agent, l be identical.
Such change wauthorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Kith	Just of an officer or director Reith Buscher Director Printed or typed name and title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as registered iis document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Kuth s	Becker 11/5/12 gnature of Registered Agent Date
If signing on be	ehalf of an entity:
 -1	Typed or Printed Name * * * FILING FEE: \$35.00 * * *
	LIDING LEE, 455.00