P04000069125

(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 Filipp Officer. Robert a. Schwartz gave Robert a. Schwartz gave Authoriz to correct current Raadless.
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SECRETARY OF STATE

Office Use Only

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COVER LETTER

Division of Corporations
SUBJECT: Old Southern Physical Opporation)
DOCUMENT NUMBER: <u>D04000 69125</u>
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:
Robert L. Schwarz (Name of contact person)
Old Southern Development Corp
300 Eogle Lane
Momitt Island, FC 32953 (City/state and zip code)
For further information concerning this matter, please call:
Robert A. Schwartz at (301) 258-8054 (Name of contact person) (Area code & daytime telephone number)
(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 409 E. Gaines Street Tallahassee, FL 32399

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: Old Southern Development (ORP
2. The principal office address: 300 Eagle, Lane
Memitt Istand PC 32953
3. The mailing address (if different): Same as a bove.
4. Date of incorporation/qualification: 4/27/04 Document number: PO 4000669125
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Robert A. Schwantz
100 BOY 539 125 S TEANING TH
-METTITI ISLAND
- COCO FC 33933 2295 2
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Robert A Schwantz Fr T
ROA FOOLS 1000
(P.O. Box NOT acceptable)
Merritt Island, Rc 32953
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.
Robert A. Schwartz, Pres. (Signature of an obser or director) (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.
14/05
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Robert A. Schwarz

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

(Typed or Printed Name)