SECRETARY OF STATE DIVISION OF CORPORATIONS

## 04000079579 2005 FEB 16 PM 3: 16

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only



400046254854

02/16/05--01017--020 \*\*35.00

QA address Chg,

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: BOWLY 3 Liles, P. A. (Name of corporation)		
DOCUMENT NUMBER: P0400079579		
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:		
Marshall T. Bower, Esquire (Name of contact person)		
Bower & Liles, P. A. (Firm/Company)		
4315 Metro Parkway, Suite 510		
Fort Myers, FL 33916-7947 (City/state and zip code)		
For further information concerning this matter, please call:		
Marshall T. Bower at (239) 931-9500 (Area code & daytime telephone number)		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399		

CR2E045(6/04)

## 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Bower & Liles P.A.
2. The principal office address: 4315 Metro Parkway, Suite 510  Fort Myers EL 33916. 7947
3. The mailing address (if different): P.O. BOX 6/17-1
Fort Myers, FL 33906-1171
4. Date of incorporation/qualification: $\frac{5/18/2004}{2004}$ Document number: $\frac{P04000079579}{2000079579}$
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Florida Department of State:  Bower, Marshall T.  15031 Process Productions
15031 Punta Rassa Road #1203
Fort Myers, FL 33908
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Bower, Marshall T.
4315 Metro Parkway Suite 510 (PO. Box NOT acceptable)
Fort Myers, FL 33916-7947
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.
Jaul F. Liles President  (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.
Marshall T. Bown February 14, 2005 (Signature of Registered Agent) February 14, 2005
If signing on behalf of an entity:
Bower & Liles, P. A. (Typed or Printed Name)

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