## P04000098419

(Requestor's Name)	
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(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MA	IL
(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	
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10-8-09

Dc



September 29, 2009

PETER FILZMAIER P. O. BOX 877 BUSHNELL, FL 33513-0049

SUBJECT: PYR PROPERTIES,INC.

Ref. Number: P04000098419

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered agent must be at a Florida street address.

A post office box is not an acceptable address for the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Letter Number: 409A00031701

Darlene Connell Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 -Tallahassee Florida 32314

## **COVER LETTER**

Amendment Section Division of Corporations	
SUBJECT:	PYR PROPERTIES, INC. Name of Corporation
DOCUMENT NUMBER:	P04000098419
The enclosed Statement of Change	e of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence c	concerning this matter to the following:
·	PETER FILZMAIER  Name of Contact Person
	Name of Contact Person
	PYR PROPERTIES, INC.
	Firm/Company
	P.O. Box 877 Address
	BUSHNELL, FL 33513  City/State and Zip Code
	SS: (to be used for future annual report notification)
For further information concerning	g this matter, please call:
PETER FILZM Name of Contact F	MAIER at ( 727 ) 871-1425 Person Area Code & Daytime Telephone Number
Name of Contact r	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

## 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: PYR PROPERTIES, INC.
2. The principal office address: CR 614A, BUSHNELL, FL 33513
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 6/23/04 Document number: POHOOOO 98419
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
PETER FILZMAIER
6777 GREENBRIER DRIVE
SEMINOLE, FL 33777-4510
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
PETER FILZMAIER
P.O. Rox 877 9229 CR 6144  P.O. Box NOT acceptable
BUSHNELL, FL 33513 -0049
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.
Signature of an infector 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.
Signatur & Registered Agent 9/22/09 Date
If signing on behalf of an entity:
Typed or Printed Name

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