

PD4000153280

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

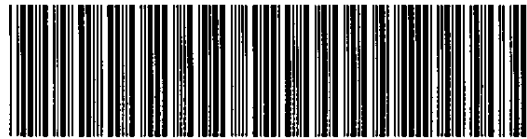
(Business Entity Name)

(Document Number)

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IN THE
SUPREME COURT OF THE UNITED STATES
ON WRIT OF HABEAS CORPUS

80/ch 8
9/27/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Donna Lee Warpool, PA
Name of Corporation

DOCUMENT NUMBER: P04000153280

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:

Donna Warpool
Name of Contact Person

Firm/Company

2223 Hunterwood Ct.
Address

Jacksonville, FL 32225
City/State and Zip Code

dwarpool@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donna Warpool at (904) 3385478
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

RECEIVED

12 SEP 12 AM 8:11
CR2E045 (03/12)
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 13, 2012

DONN WARPOOL
2223 HUNTERWOOD RD
JACKSONVILLE, FL 32225

SUBJECT: DONNA LEE WARPOOL, P.A.
Ref. Number: P04000153280

We have received your document for DONNA LEE WARPOOL, P.A.. However, the document has not been filed and is being returned for the following:

The fee to file your document is \$35.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 712A00023117

RECEIVED
12 SEP 26 AM 8:51
DIVISION OF CORPORATIONS
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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: Donna Lee Warpool, P/A
2. The principal office address: 13832 Hunterwood Rd.
Jacksonville, FL 32225
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/5/04 Document number: P04000153280
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)

Donna L. Warpool
13832 Hunterwood Rd.
Jacksonville, FL 32225

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Donne L. Warpool
2223 Hunterwood Ct.
P.O. Box NOT acceptable
Jacksonville, FL 32225

12 SEP 26 PM 12:15
DIVISION OF CORPORATIONS

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.

Donne L. Warpool
Signature of an officer or director

Donne L. Warpool Pres.
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.

Donne Warpool
Signature of Registered Agent

9/10/12
Date

If signing on behalf of an entity:

Typed or Printed Name

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