## P0400/60390

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<u>.</u>
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
Ф	cument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

TO: Amendme Division o	nt Section f Corporations		
SUBJECT:	LW FO	RBES INC.	
50 <b>5</b> 020 11	(Name o	f corporation)	
DOCUMENT NU	UMBER: PO	4000166390	P4.2
The enclosed State	ement of Change of Registered Of	Tice/Agent and fee are	e submitted for filing.
Please return all co	orrespondence concerning this ma	tter to the following:	
		H L FORBES	
	(Name of	contact person)	
		BES INC.	
*******	(Firm	/Company)	
-		ETS LANDING DRIVE	<u> </u>
		RY, FL 32746	
	(City/state	e and zip code)	
For further inform	ation concerning this matter, please	se call:	
JACINTH L FORB	ES	at ( 407	, 688-8682
(N	ame of contact person)	(Area code	688-8682 & daytime telephone number)
Enclosed is a \$35.	00 check made payable to the Dep	partment of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division 409 E. C	address: ment Section n of Corporations Gaines Street ssee, FL 32399

CR2E045(6/04)

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

•	•	ctions 607.0502, 61					is	
		d for a corporation of registered office or r						-
····	_		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.0 0, 2 .			
1. The name of the	he corporation:	LW FORBES INC.				<del></del>		
2. The principal	office address:_	2932 EGRETS LA	NDING DRIV	/E, LAKE MAF	RY, FL 32746	<u> </u>		
3. The mailing a	ddress (if differ	ent):		-				
4. Date of incorp	oration/qualific	ation: December 1	0, 2004 D	ocument numb	er: P040001	66390		
		of the current registe	ered agent and	l registered off	ice on file wit	h the		
Florida Depar	tment of State: ゴタムルづり	FRO DES				<del></del> i		
	274 ALTAMO	NTE BAY CLUB C	IRCLE, Apt 2	203		AL	05	
	ALTAMONTE	SPRINGS, FL 327	701			AH.	05 MAY	1
						ARY SSE	-2	1
6. The name and (if changed):	street address o	of the new registered	d agent (if cha	inged) and /or i	registered offi	OF STA	PM 12: 28	
	JACINTH L F	FORBES				DE A	σ,	
	2932 EGRET	S LANDING DRIVI	E					
	<u> </u>	(P.O. Box NOT acc	eptable)			-		
	LAKE MARY	, FL 32746			· · · · · · · · · · · · · · · · · · ·	_		
The street addre as changed will	ss of its registe be identical.	ered office and the s	street address	of the busines	ss office of its	s registere	ed ager	nt,
Such change wa authorized by th	s authorized by	y resolution duly accorporation has be	dopted by its en notified in	board of direct writing of the	tors or by an e change.	officer so	•	
Doc	ork		-	Jacinth L Fo	orbes (Presid	lent)		
	re of an officer or di	,	-	•	typed name and t	•		-
I hereby accept I further agree to of my duties, and document is bein corporation has	the appointment o comply with d I am familiant ng filed merely been notified i	nt as registered age the provisions of al with and accept th to reflect a change in writing of this ch	ent and agree ll statutes rel ne obligation e in the regist nange.	to act in this a ative to the pro of my position ered office add	capacity. Oper and com as registered dress, I hereb	plete perf d agent. ( y confirm	forman Or, if ti that t	ice his he
Sparket.	mature of Registered	Agent)	-	4/25	/2005_ (Date)	· · · · · · · · · · · · · · · · · · ·	·	_
If signing on bel	-	_ ,			• •/			
(T	voed or Printed Nan	BE)						

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