## P04000170608

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TO CONTRACTOR OF THE STATE OF T

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## **COVER LETTER**

DOCUMENT NUMBER: P04000170608	
DOCUMENT NUMBER: 7 5 7000 1 7 5 5 5	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing	ıg.
Please return all correspondence concerning this matter to the following:	
Phillip Bruce Calloway (Name of Contact Person)	
(Name of Contact Person)	
SPECTRUM DIVERSIFIED SERVICES, INC. (Firm/Company)	
(Firm/Company)	
607 THIRD SVE. (Address)	
(Address)	
LADY LAKE FL 32/59 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Phillip B. Calloway at (352) 228-138 (Name of Contact Person) (Area Code & Daytime Telepho	سرم

Mailing Address:
Amendment Section

Amendment Section Division of Corporations

TO:

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: SPECTRUM DIVERSIFIED SERVICES, INC.
2. The principal office address: 607 THIRD AVE.
LADY LAKE, FL 32159
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 12/21/04 Document number: Po 4000170608
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
, 1201 HAYS ST.
CORPORATION SERVICE COMPANY  1201 HAYS ST.  TAILAHASSEE, FLORIDA 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Phillip BRUCE CAlloway
607 THIRD AVE  (P.O. Box NOT acceptable)
(P.O. Box NOT acceptable)  LADY LAKE, FLORIDA 32159
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.
Marelle Calloway Marce 1/2 Calloway  (Signature of an officer or director)  Marcelle Calloway  (Printed or typed name and tible)
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.
Bulling B. Calloway 9/9/2005 (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314