

POS000005739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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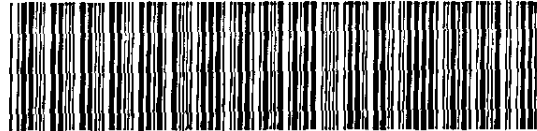
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GECNS ENTERPRISES, INC
(Name of corporation)

DOCUMENT NUMBER: P05000005739

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:

E. N. SCHULTZ
(Name of contact person)

(Firm/Company)

4352 DOTTIE CT.
(Address)

WEEKI WACHEE, FL 34607
(City/state and zip code)

For further information concerning this matter, please call:

E. N. SCHULTZ at (352) 303-5709
(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
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 20, 2005

E.N. SCHULTZ
4352 DOTTIE CT.
WEEKI WACHEE, FL 34607

SUBJECT: GECNS ENTERPRISES, INC.
Ref. Number: P05000005739

We have received your document for GECNS ENTERPRISES, INC. 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 registered agent must sign accepting the designation.

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) 245-6878.

Alan Crum
Document Specialist

Letter Number: 205A00047603

**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: GECNS ENTERPRISES, INC.
2. The principal office address: 4352 DOTTIE CT.
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/11/2005 Document number: P05000005739
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

E. N. SCHULTZ

4581 W. MOCKINGBIRD ST.

HOMOSASSA, FL 34446

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

E. N. SCHULTZ

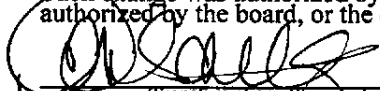
4352 DOTTIE CT.

(P.O. Box NOT acceptable)

WEEKI WACHEE, FL 34607

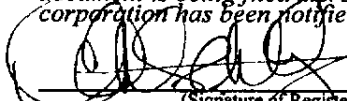
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 officer or director)

E. N. SCHULTZ 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.


(Signature of Registered Agent)

7/23/05
(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

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