

PO 50000 09892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

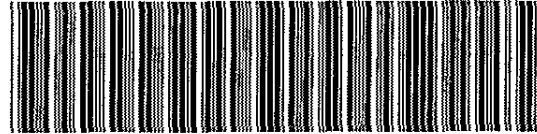
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200079575152

09/14/06--01024--024 **35.00

FILED
06 SEP 14 PM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KHN
RnChange

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TRI COUNTY MORTGAGE CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: P02000009892

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:

Loralynne Ball
(Name of Contact Person)

TRI COUNTY MORTGAGE CORPORATION
(Firm/Company)

9011 Park Blvd #204
(Address)

Seminole, FL 33777
(City/State and Zip Code)

For further information concerning this matter, please call:

Loralynne Ball at (727) 395-9095
(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

**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: TRI COUNTY MORTGAGE CORPORATION
2. The principal office address: 9011 Park Blvd #204
Seminole, FL 33777
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/20/2005 Document number: P05000009892
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

A. Wayne Holland
6251 Park Blvd Suite 9
Pinellas Park, FL 33781

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

Loralynne Ball
9011 Park Blvd #204
(P.O. Box NOT acceptable)
Seminole, FL 33777

FILED
06 SEP 14 PM 10:34
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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)

Loralynne Ball President
(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)

9/8/06
(Date)

If signing on behalf of an entity:

Loralynne Ball
(Typed or Printed Name)

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