P0500044388

(Requ	uestor's Name)	
(Addı	ress)	
(Addr	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Nai	me)
(Doct	ıment Number)	
Certified Copies	Certificate	s of Status
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400056518864

06/28/05--01022--002 **35.00

DS JUN 28 AM ID: 16

Ps 7/1/05
RO

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Team Real Es	tate of Ocala, 1 (Name of corporat	ion)	, شعد	
DOCUMENT NUMBER: PC	5000044388		 ,	
The enclosed Statement of Change	of Registered Office/Agen	t and fee are submitted for	filing.	
Please return all correspondence co	oncerning this matter to the	following:		
Robert	Vargo, Sec/Trea			**
	(Name of contact pe	rson)	, , , , , , , , , , , , , , , , , , , 	
Team Rea	1 Estate of Ocal			
	(Firm/Company)	 ,	· · · · · · · · · · · · · · · · · · ·
6148 S.W	. SR#200			
	(Address)			ada digi, Man as
Ocala, F				
	(City/state and zip o	ode)	-	÷
For further information concerning	this matter, please call:			
(Name of contact p	at (352) 291-665 Area code & daytime telep	5	
(rumo or conduct p	(13011)	Anca code & daymie telep	none number)	
Enclosed is a \$35.00 check made p	ayable to the Department o	f State.		
P.O. Box 6	nt Section Corporations	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399	•	

6/27/05

CR2E045(6/04)

TO:

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Status nge is submitted for a corporation organized under the laws of the State of $_$ F $_$ L $_1$ $_2$ $_2$ $_3$ $_4$ $_5$ $_4$ $_5$ $_5$ $_5$ $_5$ $_5$ $_6$ $_7$ $_7$ $_7$ $_7$ $_7$ $_7$ $_7$ $_7$ $_7$ $_7$	orida	
	he corporation: Team Real Estate of Ocala, Inc.		
	office address: 6148 S.W. SR#200		·-····································
The principal	Ocala, FL 34476		
3. The mailing ac	ddress (if different): same		
4. Date of incorp	poration/qualification: 3/17/05 Document number: P050000	44388	
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the truent of State:	1AL1	•
	Krautkremer, William		Sales Property
	5400 S W College Rd., Suite 302 Box 141	N 28	2 E E
	Ocala, FL 34474	F P ≥	'n
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office Krautkremer, William	D: 16 STATE STATE	
	6148 S. W. SR#200 (P.O. Box NOT acceptable)	4 + 100	
	Ocala, FL 34476	•	
as changed will	ess of its registered office and the street address of the business office of its registered. Its authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.		•••••
Hand (Clauthremy) William Krautkremer	. Rea-Aa	ent/Dir
(Signatu	william Krautkremer (Printed or typed name and time)	<u>/ Keging</u>	011.6 <u>7.5</u> 1.5
I hereby accept I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complet I am familiar with and accept the obligation of my position as registered aging filed merely to reflect a change in the registered office address, I hereby co been notified in writing of this change.	e performance ent. Or, if this onfirm that the	;
lian C	Hautbreiner 6-21-05 mature of Registered Agent) (Dyte)		
If signing on bel	half of an entity:		4
William	Krautkremer		•
	and as Brinted Marra		

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