

P05000054749

(Requestor's Name)

B & T HOME IMPROVEMENT INC
3124 SKYLINE DR
JENSEN BEACH FL 34957

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

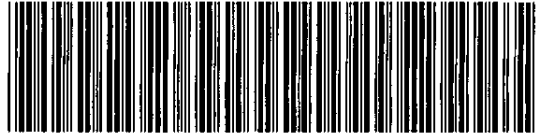
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900137470519

11/03/08--01042--015 **35.00

FILED

08 NOV -3 AM 9:56

SECRETARY OF STATE
ALL AHASSEE, FL 34901

WACH
11/4/08

**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 FL
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: B S T HOME IMPROVEMENT INC
3124 SKYLINE DR
JENSEN BEACH FL 34957
2. The principal office address: _____
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 04-13-05 Document number: P05000054749
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)

Resigned

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

MARIE H BREWSTER

3124 Sky Line Dr

(P.O. Box NOT acceptable)

Jensen Bch. FL 34957

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 NOV -3 AM 9:56

FILED

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]
(Signature of an officer or director)

William D Brewster
(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.*

Marie Brewster
(Signature of Registered Agent)

10-27-08

(Date)

If signing on behalf of an entity:

alkfjsaldkfi

(Typed or Printed Name)

*** FILING FEE: \$35.00 *** CK. 1789

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

CR2E045 (8/05)