## P05000074817

(Requestor's Name)	_		
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status	_		
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NY STATEMENT OF LORIDA

NY STATEMENT

THE SECRETARY OF STAIL OF COPPORATE.

K.A. Change

**C.COULLIETTE** 

JAN 11 2010

**EXAMINER** 

## **COVER LETTER**

TO: Amendmer Division of	nt Section Corporations		
SUBJECT:	Moorings Development,	Inc.	
SCHOLET	Name of Co	orporation	
DOCUMENT NU	MBER: P05000074817		
The enclosed States	ment of Change of Registered Office	Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:			
		•	
	Frances Casey Lowe		
•	Name of Cor	tact Person	
	Frances Casey Lowe,		
	Firm/Co	mpany	
	3042 Crawfordville	Hwy,	
	Addı	ess	
	Crawfordville, Flor	ida 32327	
	City/State an	d Zip Code	
shelley@francielowe.com			
E-mail address: (to be used for future annual report notification)			
		·	
For further informa	ation concerning this matter, please of	all:	
Francie Lo	owe	at (850 926-8245	
Nar	ne 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

statement of chan	covisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
1. The name of th	e corporation: Moorings Development, Inc.
2. The principal of	ffice address: 1000 US Hwy. 98  Carrabelle, FL 323222
3. The mailing ad	dress (if different): PO Box M, 1000 US Hwy. 98, Carrabelle FL 3232
4. Date of incorpo	pration/qualification: 5/23/2005 Document number: P05000074817
	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
	Fowler Boggs Banker, P.A.
	501 E. Kennedy Blvd. Ste. 1700
	Tampa, FL 33602
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Frances Casey Lowe, P.A.
	3042 Crawfordville Hwy.
	P.O. Box NOT acceptable Crawfordville, Florida 32327
as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Signatur	Robert E. Prince, Director  Printed or typed name and title
I hereby accept I further agree t of my duties, an document is beil corporation has	the appointment as registered agent and agree to act in this capacity.  o comply with the provisions of all statutes relative to the proper and complete performance  d I am familiar with and accept the obligation of my position as registered agent. Or, if this  ng filed merely to reflect a change in the registered office address, I hereby confirm that the  been notified in writing of this change.
Franc	els C. Lowe 1-11-2010 Date
If signing on be	half of an entity:
France	es C. Lowe, P.A.  yped or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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