

P05000080293

(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



300244074773

01/28/13--01025--023 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JAN 28 PM 2:30

R.A.

FEB - 1 2013

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Angeloni Tax Advisory Group Inc.

Name of Corporation

DOCUMENT NUMBER: P050000 80293

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:

Howard Angeloni

Name of Contact Person

Angeloni Tax Advisory Group Inc.

Firm/Company

11932 Balm Riverview Rd

Address

Riverview, FL 33569

City/State and Zip Code

ataxadvisory@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Louise Seaman

Name of Contact Person

at (813) 628-8008

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

1. The name of the corporation: Angeloni Tax Advisory Group Inc.
2. The principal office address: 11932 Balm Riverview Rd, Riverview FL 33569
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 6-1-2005 Document number: P05000080293
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)

Howard C Angeloni Jr.

3655 Cortez Rd W Ste 100

Bradenton FL 34210

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

Howard C Angeloni Jr
Angeloni Tax Advisory Group Inc.

11932 Balm Riverview Rd

P.O. Box NOT acceptable

Riverview, FL 33569

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JAN 28 PM 2:30

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

Howard C Angeloni Jr. 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]
Signature of Registered Agent

1-25-2013

Date

If signing on behalf of an entity:

Typed or Printed Name

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