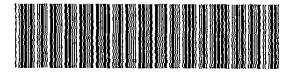
P05000090074

(Re	questor's Name)	
(Ad	dress)	 ,
(Add	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
•		
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	
		}
		}
		Ì
<u> </u>	<u> </u>	

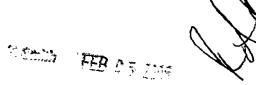
Office Use Only



100063506971

01/13/06--01012--012 **35.00

SECRETARY OF STATE



COVER LETTER

	nent Section of Corporations		
SUBJECT:	Charlot	(Name of Co	nogness In reporation)
DOCUMENT N	NUMBER: PO	5000	090074
	1		Agent and fee are submitted for filing.
Please return all	correspondence concerning	ng this matter	to the following:
	R_{i}	Ch 1/ Name of Con	Ban toac tact Person)
		1	
		(Firm/Cor	
	400	6 PE	DINCIANO CT
		(1 52 3468 A Zip Code)
For further infor	mation concerning this ma	atter, please c	all:
_Rich	Name of Contact Person	bett	at (Area Code & Daytime Telephone Number)
()	0	(Alea Code & Daytille Telephone (Validet)
Enclosed is a \$3	5.00 check made payable	to the Departi	nent of State.
		1	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 19, 2006

RICHARD BANTOCK 4006 POINCIANA CT PALM HARBOR, FL 34684

SUBJECT: CHARLOTTE PROGRESS CORPORATION

Ref. Number: P05000090074

We have received your document for CHARLOTTE PROGRESS CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form that you have sent in is not correct for changing a registered agent on a Florida corporation. I am sending you the correct forms to do your changes. Also it is \$35.00 per resignation for an officer/director.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith Document Specialist

Letter Number: 506A00003890

06 JAN 31 AH 8: 00

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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Charlo He Progress Corporation
2. The principal office address: 4006 Poinciona Court
3. The mailing address (if different):
5. The maining address (if directent).
4. Date of incorporation/qualification: 6 23 2005 Document number: 905000 900 74
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Justin R. Vaske
16121 Bridgedale Orive
Lithia, FL 33547
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Richard Bontoch
4006 Poinciana Court
Palm Harber FL 34684 器写
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.
Richard Bantock President
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.
1/5/06
(Signature of Registered Agent) (Date) If signing on behalf of an entity:
(Typed or Printed Name)
* * * FILING FEE: \$35.00 * * *

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