

PO5000098274

(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



200058820872

08/29/05--01020--017 **35.00

FILED
05 AUG 29 PM 2:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Smith

AUG 30 2005

ARC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: F. Esposito Inc.
(Name of corporation)

DOCUMENT NUMBER: P05000098274

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:

Christine C. Esposito
(Name of contact person)

Great Florida Insurance of Winter Park
(Firm/Company)

501 N. Orlando Ave., Suite 311
(Address)

Winter Park, FL 32789
(City/state and zip code)

For further information concerning this matter, please call:

Christine C. Esposito at (407) 629-9800
(Name 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
409 E. Gaines Street
Tallahassee, FL 32399

**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: F. Esposito Inc.
2. The principal office address: 501 North Orlando Ave., Suite 311
Winter Park, FL 32789
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 8/1/05 Document number: P05000098274

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Portia B. Scott
921 SE Central Parkway
Stuart, FL 34994

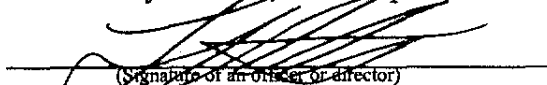
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Christine C. Esposito
501 N. Orlando Ave., Suite 311
(P.O. Box NOT acceptable)
Winter Park, FL 32789

FILED
05 AUG 29 PM 2:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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 of an officer or director)

Frank M. Esposito, owner
(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.

Christine C. Esposito
(Signature of Registered Agent)

8/26/05
(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