P05000107446

(Requestor's Name)
(Address)
(Addless)
· (Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
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RA. Charge

APR 2 0 2009

EXAMINER

COVER LETTER

Division of Corporations	• •
SUBJECT: G & B Shrimping, Inc. (Name of Corporation)	
(Name of Corporation	on'y
DOCUMENT NUMBER: P05000107446	
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.
Please return all correspondence concerning this matter to the fe	ollowing:
	,
Jason Hedman, (Name of Contact Per	Esq.
(Name of Contact Per	son)
	•
Hedman & Woote (Firm/Company)	n, P.A.
(Firm/Company)	
335 S. Plumosa Stre	et, Ste, E
(Address)	
Merritt Island, Flori (City/State and Zip Co	da 32952
	ode)
For further information concerning this matter, please call:	
Jason Hedman, Esg. at (321) 452-3720
Jason Hedman, Esq. at ((Name of Contact Person) (A	321) 452-3720 Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of	State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
1 ananassee, 1 L 32314	2001 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (8/05)

TO: Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: G & B Shrimping, Inc.	
2. The principal	l office address: 160 Ennis Drive, Merritt Island, Florida 32952	
3. The mailing a	address (if different): Same	
4. Date of incorp	poration/qualification: 8/2/05 Document number: P05000107446	_
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	
	Larry Glenn (deceased)	
	160 Ennis Drive	
	Merritt Island, Florida 32952 ZES 9	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office PR T SEE T T T T T T T T T T T T T T T T T	
	306 N. Azura Lana	J
	(P.O Box NOT acceptable)	
	Cocoa Beach, Florida 32931	
The street address changed will	ress of its registered office and the street address of the business office of its registered agent, I be identical.	
Such change wauthorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
	Herbert Brower, Vice President (Printed or typed name and title)	
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance nd I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the is been notified in writing of this change.	
X6 2	elect Brower 4-10-09	
(Si	ignature of Registered Agent) (Date)	
If signing on be	ehalf of an entity:	
Herbert	Brower, Registered Agent (Typed or Printed Name)	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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