P05000150564

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	" '
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400082429494

12/13/06--01029--003 **35.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

B 12/14/06

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: TEMPLAR REALTY AND INVESTMEN (Name of Corporation)	IT, INC.			
DOCUMENT NUMBER: P05000150564				
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.			
Please return all correspondence concerning this matter to the f	following:			
LAURA M. LICASTRO, ESQ. (Name of Contact Per	rson)			
TEMPLAR REALTY AND INVESTMENT, INC. (Firm/Company)				
3102 W. WATERS AVE. SUITE 103A (Address)				
TAMPA, FLORIDA 33614 (City/State and Zip C	Code)			
For further information concerning this matter, please call:				
LAURA M. LICASTRO, ESQ. at ((A) ()	288 0420 X323 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 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.	
	the corporation: TEMPLAR REALTY AND INVESTMENT, INC.	
	office address: 3102 W. WATERS AVE. SUITE 103A TAMPA, FL 33614	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 11/14/2005 Document number: P05000150564	
	d street address of the current registered agent and registered office on file with the rtment of State:	
	LAURA M. LICASTRO, ESQ.	迨
	3821 HENDERSON BLVD.	2006
	TAMPA, FL 33629	DEC 1
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	2006 DEC 13 PM
	LAURA M. LICASTRO, ESQ.	1:10
	3102 W. WATERS AVE. SUITE 103A	
	(P.O. Box NOT acceptable)	
	TAMPA, FL 33614	
The street addre	ess of its registered office and the street address of the business office of its registered be identical.	agent,
Such change was	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
XIIII	uMZ: Loure M. Licastr	U
(Signatu	ure of an officer or director) (Printed or typed name and title)	-
I hereby accept I further agree to of my duties, an document is bei corporation has	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 perfo nd I am familiar with and accept the obligation of my position as registered agent. On ing filed merely to reflect a change in the registered office address, I hereby confirm t s been notified in writing of this change.	rmance r, if this hat the
May	uM	
(Sig	gnature of Registered Agent) (Date)	
If signing on be	ehalf of an entity:	
(1	Typed or Printed Name)	

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