## 06000019929

(Re	equestor's Name)	<u> </u>
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
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## **COVER LETTER**

Division of C	orporations	
subject: David	W. Collier, P.A. (Name of Corp.)	poration)
DOCUMENT NUM	BER: P06000019929	·
The enclosed Stateme	nt of Change of Registered Office/A	agent and fee are submitted for filing.
Please return all corre	spondence concerning this matter to	the following:
<u>D</u> :	avid W. Collier (Name of Conta	ct Person)
<u>Da</u>	avid W. Collier, P.A. (Firm/Com	pany)
	5 Doyle Rd. # 303-191 (Addres	s)
<u>De</u>	tona, FL 32725 (City/State and 2	Zip Code)
For further information	n concerning this matter, please call	:
David W. Collier (Name	of Contact Person)	at ( 407 ) 782-6410 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 c	check made payable to the Departme	ent 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: David W. Collier, P.A.
2. The principal office address: 915 Doyle Rd. #303-191, Deltona, FL 32725
3. The mailing address (if different):
4. Date of incorporation/qualification: 02/08/2006 Document number: P06000019929
5. The name and street address of the current registered agent and registered office on file with the Horida Department of State:
David W. Collier
100 South Beach St., Suite 200
Daytona Beach, FL 32114
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
David W. Collier
David W. Collier  691 Manchester Ave.  (P.O. Box NOT acceptable)  Deltons El 20705
Deltona, FL 32725
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.
David W. Collier, 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 of Registered Agent (Date)
If signing on behalf of an entity:
(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 \* \* \*