## P06000 81527

		•
(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City.	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
,		

Office Use Only



800109125928

09/11/07--01009--018 \*\*35.00

O7 SEP II AN ID: 44
SECRETARY OF STATE
TAIL AN ASSET FI ORIDA

160° 28,

## **COVER LETTER**

TO: Ame	endment Section ision of Corporations				
SUBJECT: Hometown First Realty Inc.  (Name of Corporation)					
DOCUMENT NUMBER: P06000081527					
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:					
	Kenneth Collin Ryan (Name of Conta	ct Person)			
Hometown First Realty Inc. (Firm/Company)					
107 east Call St. Starke, Florida 32091 (Address)					
	Starke, Fl. 32091				
(City/State and Zip Code)					
For further i	nformation concerning this matter, please call	l:			
Kenneth Co	(Name of Contact Person)	at ( 904 ) 364-8213 (Area Code & Daytime Telephone Number)			
Enclosed is	a \$35.00 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			

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

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Sta organized under the laws of the State of Flo egistered agent, or both, in the State of Flo	orida
1. The name of t	the corporation: Hometown First Re	alty Inc.	
2. The principal	office address: 107 east Call St. Sta	arke, Florida 32091	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification:	Document number: P0600008	1527
	d street address of the current registe tment of State:	red agent and registered office on file with	the
	Dwight C. Hewett		
	3155 NW 82 Avenue Suite	101	
	Miami, FL. 33122		Žu o
6. The name and (if changed):	I street address of the new registered	l agent (if changed) and /or registered office	FI SEP ECRETA ELEAHAS
	Kenneth Collin Ryan		
	12166 NW CR 225		Frsi
	(P.O. Box NOT acce	:ptable)	REAL P
	Starke, Fl. 32091		> -
The street addre	ess of its registered office and the s be identical.	treet address of the business office of its	registered agent,
Such change wa authorized by th	as authorized by resolution duly ad the board, or the corporation has been	opted by its board of directors or by an olen notified in writing of the change.	fficer so
(Signatu	ire of an officer or director)	(Printed or typed name and title	3
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered age to comply with the provisions of all a lam familiar with and accept the filed merely to reflect a change been notified in writing of this change	nt and agree to act in this capacity. I statutes relative to the proper and comp e obligation of my position as registered of in the registered office address, I hereby ange.	
Keliae	th Clya	5 Sept 07	
(13) m	mature Registered Agent)	(Date)	
11	half of an entity:		
Kenneth C	Ryac 'yped or Printed Name)		

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