

FD600095851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

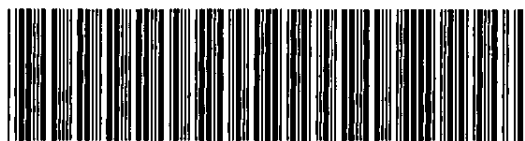
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04/18/07--01024--001 **35.00

LA to chg.

FILED
07 MAY - 7 AM 8:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts MAY 08 2007

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 20, 2007

THOMAS J. MILITTI
MILITTI APPRAISAL SERVICE, INC.
905 E 2ND PLAZA
PANAMA CITY, FL 32401

SUBJECT: MILITTI APPRAISAL SERVICE, INC.
Ref. Number: P06000095851

We have received your document for MILITTI APPRAISAL SERVICE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Document Specialist

Letter Number: 907A00026920

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Militti Appraisal Service, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P0600095851

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:

Tom Militti
(Name of Contact Person)

Militti Appraisal Service, Inc.
(Firm/Company)

905 E 2nd Plaza
(Address)

Panama City, FL 32401
(City/State and Zip Code)

For further information concerning this matter, please call:

Tom Militti at (850) 769-9720
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED
07 MAY -2 AM 8:00
DIVISION OF CORPORATIONS

**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: Militti Appraisal Service, Inc
2. The principal office address: 905 E 2nd Plaza, Panama City, FL 32401
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7/20/2006 Document number: P06000095851
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

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

Tom Militti

905 E 2nd Plaza

(P.O. Box NOT acceptable)

Panama City, FL 32401

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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.

Tom Militti
(Signature of an officer or director)

Tom Militti, 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)

5-1-07
(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

CR2E045 (8/05)