

P07 000074127

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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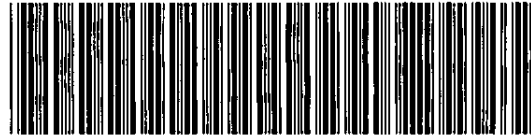
(Business Entity Name)

(Document Number)

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Rachel 1/23/14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BROOKS REAL ESTATE Company
Name of Corporation

DOCUMENT NUMBER: PO 7000074127

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:

JAMES DOUBLAS BROOKS TR
Name of Contact Person

BROOKS REAL ESTATE Company
Firm/Company

P.O. Box 38
Address

OTTO, NC 28763
City/State and Zip Code

Jbrooks795@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DOUG BROOKS at (772) 519 1050
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 23, 2013

BROOKS REAL ESTATE COMPANY
P.O. BOX 38
OTTO, NC 28763

SUBJECT: BROOKS REAL ESTATE COMPANY
Ref. Number: P07000074127

We have received your document for BROOKS REAL ESTATE COMPANY and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

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) 245-6050.

Carol Mustain
Regulatory Specialist II

Letter Number: 213A00027343

**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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: BROOKS REAL ESTATE COMPANY
2. The principal office address: 8325 HIDDEN PINES RD.
FT. PIERCE, FL 34945
3. The mailing address (if different): P.O. Box 38
OTTO, NC 28763
4. Date of incorporation/qualification: 6-26-07 Document number: PO 7000074127
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

JAMES DOUGLAS BROOKS JR
1772 GULFSTREAM AVE A-1
FT. PIERCE, FL 34949

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

LYDIA LEE STURAT
8325 HIDDEN PINES RD
P.O. Box NOT acceptable
FT. PIERCE, FL 34945

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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.

[Signature]
Signature of an officer or director

JAMES DOUGLAS BROOKS JR
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.

Lydia (Lee) Sturat
Signature of Registered Agent

1-8-2014
Date

If signing on behalf of an entity:

Typed or Printed Name

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