

P07000124314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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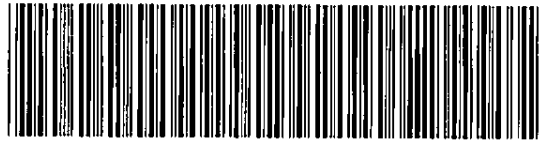
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JUN 26

S. PRATHER

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: G.W. Robinson Builders, Inc  
Name of Corporation

DOCUMENT NUMBER: P07000124314

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:

John Schmitt  
Name of Contact Person

G.W. Robinson Builders, Inc.  
Firm/Company

6208 NW 43rd St.  
Address

Gainesville, FL 32653  
City/State and Zip Code

john@gw-homes.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Schmitt at ( 352 ) 373-1724  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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: G.W. Robinson Builders, Inc.

2. The principal office address: 6208 NW 43<sup>rd</sup> St.  
Gainesville, Fl. 32653

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: \_\_\_\_\_ Document number: P07000124314

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)

Glenda <sup>Schmitt</sup> Kate M. Robinson  
6208 NW 43<sup>rd</sup> St.  
Gainesville, Fl. 32653

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

John R. Schmitt  
6208 NW 43<sup>rd</sup> St.  
Gainesville, Fl. 32653

P.O. Box NOT acceptable

2024 MAY 15 AM 7:45  
CLERK OF STATE  
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.

Glenda G Robinson  
Signature of an officer or director

Glenda G Robinson, 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]  
Signature of Registered Agent

05/10/2024  
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 (04/13)