# P07000130706

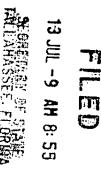
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| Certified Copies Certificates of Status |                      |                  |
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| Special Instructions to                 | Filing Officer:      |                  |
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Office Use Only



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C. LEWIS
JUL 1 2 2013
EXAMINER

#### **COVER LETTER**

TO:

Amendment Section Division of Corporations

# SUBJECT: TRANSITIONS REAL ESTATE, INC

Name of Corporation

P07000130706

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:

### **EVELYN J GUZMAN**

Name of Contact Person

#### TRANSITIONS REAL ESTATE, INC

Firm/Company

302 MICHIGAN AVE

Address

LEESBURG, FL 34748

City/State and Zip Code

# GUZMANEJ@EMBARQMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EVELYN J GUZMAN

<sub>-</sub>352

255-1354

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

# 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: TRANSITIONS REAL ESTATE, INC  |
| 2. The principal office address: 302 MICHIGAN AVE LEESBURG, FL 34748  |
| 3. The mailing address (if different): PO BOX 491851  LEESBURG, FL 34749  |
| 4. Date of incorporation/qualification: 12/12/2007 Document number: P07000130706  |
| 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)  |
| EVELYN J GUZMAN   |
| 302 MICHIGAN AVE  |
| LEESBURG, FL 34748  |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):   |
| 302 MICHIGAN AVE  |
| LEESBURG, FL 34748  |
| The street address of its registered office and the street address of the business office of its registred 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.   |
| Eulyn J. Lyman Evelyn J. Gyzman, 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. |
| Evelen J. Frynan 7/5/13 Signature of Registered Agent Date  |
| If signing on behalf of an entity:  |
| Typed or Printed Name   |

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