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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Douglas S Wood PA Name of Corporation
DOCUMENT NUMBER: P07000135362
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:
Douglas Wood Name of Contact Person Douglas S. Wood PA S Firm/Company
3940 Versailles Drive Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (\$13) 451 9760 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

Fursuant 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: Douglas S. Wood PA 2. The principal office address: 3940 Versailles Drive
Tampa, FL 33634
3. The mailing address (if different):
4. Date of incorporation/qualification: 12/28/2007 Document number: P07000/35362
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)
11825 Lancashire Prive
Tampa, FL 33626
Douglas S. Wood
6. The name and street address of the new registered agent (if changed) and /or registered office.
Douglas S. Wood
3940 Versailles Drive P.O. Box NOT acceptable
P.O. Box NOT acceptable
Tampa 1-L 33634 2
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 of an officer or director Douglas S. Wood Treasurer 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 (0/14/13) Date
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

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