

P100000004214

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Roberts SEP 08 2010

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: VETERANS RETIREMENT RESOURCES INC  
Name of Corporation

DOCUMENT NUMBER: PD0000004214

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:

WILLIAM PEARSON  
Name of Contact Person

VETERANS RETIREMENT RESOURCES INC  
Firm/Company

611 DRUID RD EAST #103  
Address

CLERMONT FL 33756  
City/State and Zip Code

Wpearson1@Tampabay.rr.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLIAM R. PEARSON at ( 727 ) 5425960  
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: VETERANS RETIREMENT RESOURCES INC.

2. The principal office address: 611 DRUID RD EAST 103 CLEARWATER  
FLORIDA 33756

3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 1-14-10 Document number: P10000004214

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)

WILLIAM Pearson  
1485 ROSE TREE CT  
CLEARWATER FL 33764

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

WILLIAM R. Pearson  
611 DRUID ROAD EAST 103  
CLEARWATER FL 33756

P.O. Box NOT acceptable

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.

William R. Pearson  
Signature of an officer or director

WILLIAM R. Pearson  
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.

William R. Pearson  
Signature of Registered Agent

9/2/2010  
Date

If signing on behalf of an entity:

WILLIAM R. Pearson  
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)

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE