



Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : HILL WARD HENDERSON
Account Number : 072100000520
Phone : (813)221-3900
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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SECRETARY OF STATE
TALLAHASSEE, FL

REGISTERED AGENT CHANGE
ANCHOR INVESTMENTS WEST, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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J. HORNE
APR -7 2022

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Help

((H22000124911 3)))

**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: ANCHOR INVESTMENTS WEST, INC.

2. The principal office address: 310 S FIELDING AVENUE, TAMPA, FL 33606

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 07/19/2012 Document number: P12000063248

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)

PARKER JOHN RITZDORF

5583 GATLIN AVENUE

ORLANDO, FL 32812

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

PARKER RITZDORF

310 S FIELDING AVENUE

P.O. Box NOT acceptable

TAMPA, FL 33606

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.

Karen North

KAREN F. NORTH

Signature of an officer or director

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.*

Parker Ritzdorf

03/30/2022

Signature of Registered Agent (Parker Ritzdorf)

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)

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