

P30938

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

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RE-SUBMIT

Please retain original filing
date of submission 7/21

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

REGISTERED AGENT CHANGE E & D SPECIALTY STANDS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RA/RO/chg
@ 7/28/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: E & D Specialty Stands, Inc.
Name of Corporation

DOCUMENT NUMBER: P30938

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:

Charlene Heppel
Name of Contact Person

E & D Specialty Stands, Inc.
Firm/Company

P.O. Box 700
Address

North Collins, NY 14111
City/State and Zip Code

cheppel@edstands.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charlene Heppel at (716) 337-0161
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

CR26045 (8/05)



D200615

July 22, 2011

FLORIDA DEPARTMENT OF STATE
Division of CorporationsE & D SPECIALTY STANDS, INC.
POST OFFICE BOX 700,
NORTH COLLINS, NY 14111SUBJECT: E & D SPECIALTY STANDS, INC.
REF: P30938

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist IIFAX Aud. #: H11000186860
Letter Number: 411A00017357RECEIVED
11 JUL 28 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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 New York in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: E & D Specialty Stands, Inc.
2. The principal office address: 2081 Franklin Street, North Collins, NY 14111
3. The mailing address (if different): P.O. Box 700, North Collins, NY 14111
4. Date of incorporation/qualification: 9/12/1990 Document number: P30938
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)

Robert Coc

1001 Starkey Road, Lot 11, Largo, FL 34641

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

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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]
Signature of an officer or director

Dean Metzger 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.

By:

C T Corporation System

[Signature]
Signature of Registered Agent

Date

7/27/2011

If signing on behalf of an entity:

C T Corporation System

Typed or Printed Name

JAMES M. NEWSOME
Special Assistant Secretary

*** 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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUL 21 AM 8:47