P36437

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA







ACCOUNT NO. : 072100000032

REFERENCE : 324358

AUTHORIZATION :

COST LIMIT : \$ 35.00

CODI HIMIT . V 00.00

ORDER DATE : April 20, 2005

ORDER TIME: 11:03 AM

ORDER NO. : 324358-010

CUSTOMER NO: 7398273

CUSTOMER: Greg Bowman

Jack Henry & Associates, Inc.

663 W Highway 60

Monett, MO 65708

CHANGE OF AGENT

NAME: TWS SYSTEMS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Michigan r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: TWS SYSTEMS, INC.
2. The principal	office address: 28100 US Highway 19N, Clearwater, FL 33761
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: November 15, 1991 Document number: P36437
	I street address of the current registered agent and registered office on file with the tment of State:
	Robert E La Plant, CPA
	201 East Kennedy Boulevard, Suite 715
	Tampa, FL 33602
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Corporation Service Company
	1201 Hays Street OT #
	(P.O. Box NOT acceptable)
	Tallahassee, FL 32301
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Kignat	Kevin D. Williams, Treasurer (Printed or typed name and title)
I further agrée of my duties, ar document is be corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
By lenn	ion Service Company 4 28 05 grature of Registered Agent) (Date)
If signing on be	chalf of an entity:
	Geldof, Asst. VP Typed or Printed Name)

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