

P38052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900058995639

09/14/05--01024--001 **35.00

FILED

05 SEP 14 AM 10:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. change

T BROWN SEP 21 2005

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SHERROD VANS, INC.
(Name of corporation)

DOCUMENT NUMBER: _____

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:

JACK. C. SHERROD
(Name of contact person)

SHERROD VANS, INCC.
(Firm/Company)

6464 GREENLAND ROAD
(Address)

JACKSONVILLE, FL 32258
(City/state and zip code)

For further information concerning this matter, please call:

JACK C. SHERROD 904 268-3321
(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
409 E. Gaines Street
Tallahassee, FL 32399

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

1. The name of the corporation: SHERROD VANS, INC.
2. The principal office address: 6464 GREENLAND ROAD, JACKSONVILLE, FL 32258
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3-19-92 Document number: P38052
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

MR. RONALD OWEN
COKER, MYERS, SCHICKEL, ET. AL.
138 EAST BAY STREET
JACKSONVILLE, FL 32202

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

MR. JIM TERRELL
BROWN, TERRELL AND HOGAN
2280 EAST BAY STREET
JACKSONVILLE, FL 32202

FILED
05 SEP 14 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

JACK C. SHERROD
(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]
(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

BROWN, TERRELL AND HOGAN
(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