P30053776



ABP 2151 E. SEMORAN BLVD. APOPKA, FL 32703

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Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

(Corporation Name)	- (Document #)	
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4. (Corporation Name)	(Document #)	OBJUE OF STATE
□ Walk in□ Pick up time□ Mail out□ Will wait	Photocopy	☐ Certified Copy ☐ Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	· ·- ·
 □ Profit □ Not for Profit □ Limited Liability □ Domestication □ Other 	Amendment Resignation of R.A Change of Registe Dissolution/Withd Merger	ered Agent
OTHER FILINGS	REGISTRATION/QI	<u>JALIFICATION</u>
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnersh ☐ Reinstatement ☐ Trademark ☐ Other	ip ***********************************

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, of 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of LOCIDA
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation is:
H. GRAHAM HIGGINS SALES COMPANY
2. The mailing address of the corporation is: 2151 E SEMORAN BUD
Apopka & 32703
3. Date of incorporation/qualification: 81293 Document number: P9300053776
4. The name and address of the current registered agent and office:
Higgins, H.G
5832 GOMWOOD DR 7000
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
BRUCE H. WILSON BOX NOT Acceptable)
2151 E SEMDRAD BUDO
Apopka (2 32)03
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.
10m Wilson 8/24/00
(Signature of an officer, chairman or vice chairman of the board) (Date)
PRUCE M WILLOW PRESIDENT
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity.
performance of my duties, and I am familiar with and accept the obligation of my position as
registered agent.
(Signature of Registered Agent) (Date)
f signing on behalf of an entity:
(Typod or Brintod Nama)
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

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