P94000010769

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R.A. Charge C.COULLIETTE

MAY 07 2009

EXAMINER

COVER LETTER

TO:	Amendment Section Division of Corporations					
SUBJI	ECT: John T. Brown, P.A. (Name of Corporation)					
DOCUMENT NUMBER: P94000010769						
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:						
	John T. Brown (Name of Contact Person)					
(Firm/Company)						
1940 LEWIS TURNER BLVD. (Address)						
Fort Walton Beach, Florida 32547 (City/State and Zip Code)						
For fu	ther information concerning this matter, please call:					
	John T. Brown at (850) 244-4177 (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					

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

	er to change its registered office or registance. The corporation: John T. Brown, P.	•	
2. The principa	l office address: 126 NE Eglin Park		
Fort Walte	on Beach, Florida 32548		
3. The mailing	address (if different):		
4. Date of incor	rporation/qualification: 2/4/94	Document number: P94000	0010769
	d street address of the current registered artment of State: (If resigned, enter resign		th the
	John T. Brown		-
	126 NE Eglin Parkway		09 A
	Fort Walton Beach, Florida 325	548	AFF & TI
6. The name an (if changed):	d street address of the new registered ag	ent (if changed) and /or registered off	
	John T. Brown		
	1940 LEWIS TURNER BLVD.	•	
	(P.O. Box NOT acceptab	le) .	
	Fort Walton Beach, Florida 32	547	_
_	ess of its registered office and the stree l be identical.		
Such change wathorized by t	as authorized by resolution duly adopt he board, or the corporation has been r	ed by its board of directors or by an otified in writing of the change.	officer so
Signat	ure of an officer or director)	John T. Brown, Pre (Printed or typed name and t	esident
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent a to comply with the provisions of all sto nd I am familiar with and accept the ol ing filed merely to reflect a change in t s been notified in writing of this chang		
Or	050	4/27/09	
(Si	gnature of Registered Agent)	(Date)	
If signing on be	ehalf of an entity:		
ſ	Typed or Printed Name)		
	* * * FILING F	EE: \$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)