## Florida Department of State

Division of Corporations Public Access System

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## REGISTERED AGENT CHANGE

JONATHAN M. FRANTZ, M.D., P.A.

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11/2/2005

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

Pursuam				
	•	617.0502, 607.1508, or 617.1508, Florida Statute		
	- · · · · · · · · · · · · · · · · · · ·	on organized under the laws of the State of FLOF		
	in order to change its registered office	or registered agem, or both, in the State of Florida.	ı	
1. The na	ame of the corporation: JONATHAN I	M. FRANTZ, M.D., P.A.		
<del>-</del>	rincipal office address: 12731 NEW E	BRITTANY BOULEVARD		<del></del>
FOR	RT MYERS, FL 33907		·	
3. The m	ailing address (if different): P.O. BO)	K 61199		
FOR	T MYERS, FL 33906-1199			
4. Date o	of incorporation/qualification: 06/06/1	994 Document number: P940000418	68	
5. The na Florida	ame and street address of the current reg a Department of State:	sistered agent and registered office on file with the		
	JEFFREY W. FRANT	Z		
	12550 BISCAYNE B	OULEVARDS, SUITE 406	ن	,
	NORTH MIAMI, FL 3	3181	50 50	333
6. The na (if char	ame and street address of the new registenged):	ered agent (if changed) and for registered office	05 NOV -	
	GUY E. WHITESMA	N	<b>~</b> ?	
	1715 MONROE STR		PH 4:	F STAI
	(P.O. Box NOT	•		
	FORT MYERS, FL 3	33901	ယ	S
The stree	et address of its registered office and the	he street address of the business office of its regis	tered agent,	
		y adopted by its board of directors or by an office then notified in writing of the change.		
1	Man Du Dinton			
(	(Signature of an officer or director)	JONATHAN M. FRANTZ, Pres	sident	
I hereby i I further of my du documen corporat	accept the appointment as registered agree to comply with the provisions of the sund I am familiar with and accept it is being filed merely to reflect a chait in has been notified in writing of this	agent and agree to act in this cupacity. If all statutes relative to the proper and complete It the obligation of my position as registered agen age in the registered office address, I hereby conj I change.	performance it. Or, if this firm that the	
	110	11-2-05		
	(Signature of Registered Agent)	(Date)		
If signing	g on behalf of an entity:			
	<b>-</b>			

\* \* \* 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)

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