## P95000058732

(Re	equestor's Name)	
(Ad	ldress)	_
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(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: Caloosa Plumbing , Inc. (Name of Corp.)	oration)
DOCU	UMENT NUMBER: P95000058732	
The en	nclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.
Please	e return all correspondence concerning this matter to	the following:
	Jim Dailey (Name of Contac	t Person)
	Caloosa Plumbing , Inc. (Firm/Comp	any)
	2992 South Street (Address	
	Fort Myers, FL 33916 (City/State and Z	ip Code)
For fur	rther information concerning this matter, please call:	
Jim D	Oailey a (Name of Contact Person)	t (239 ) 277-1110 (Area Code & Daytime Telephone Number)
Enclose	sed is a \$35.00 check made payable to the Departmen	nt 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

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Caloosa Plumbing, Inc.	
2. The principal office address: 2992 South Street, Fort Myers, FL 33916	_
3. The mailing address (if different):	_
4. Date of incorporation/qualification: 7/28/1995 Document number: P95000058732	_
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
John T. St Germain	
✓ 15331 Sam Snead Lane	
North Fort Myers, FL 33917	
North Fort Myers, FL 33917  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Gerard McHale	ו ב רח
Gerard McHale	
1601 Jackson Street, Suite 200	
(P.O. Box NOT acceptable)  Fort Myers, FL 33901	
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 of an opticer or director)  Gerand H. M. Hale J.,  (Printed or typed name and title)	
לארים (Finited of Appendiance of Ap	
Herard Mellalot 4/21/01 (Signature of Registered Agent)  (Signature of Registered Agent)	
f signing on behalf of an entity:	
Gerard A. McHale, Jr.  (Typed or Printed Name)	

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