P96000043007

| (Requestor's Name) | | | | |
|---|----------------|-------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (/ 10 | uicssy | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | TIAW | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificate: | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

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TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations | |
|---|--|
| | |
| SUBJECT: Poe & Associates, Inc. (Name of corporati | on) |
| • | |
| DOCUMENT NUMBER: P96000043009 | |
| The enclosed Statement of Change of Registered Office/Ag | ent and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the | ne following: |
| Brenda L. McGehee | e e e |
| (Name of person) | · · · · · · · · · · · · · · · · · · · |
| Poe Financial Group, Inc. (Name of firm/company) Before 7/18/03: 511 W. Bay Street, Suite 400 (Address) | After 7/21/03: 302 Knights Run Avenue, Suite 700 Tampa, FL 33602 |
| Tampa, FL 33606 (City/state and zip code) For further information concerning this matter, please call: | |
| to traction miorimicion conconning and matter, proude out. | |
| Brenda L. McGehee at (813 (Name of person) (Area code | 259-4047 & daytime telephone number) |
| (Name of person) (Area code | : & daytime telephone number) |
| Enclosed is a \$35.00 check made payable to the Department | t of State. |

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

| this statement o | provisions of sections 607.0502, f change is submitted for a corpora in order to change its regist | tion organized under the laws of | the State of |
|--|--|---|---|
| of Florida. | in order to change its regist | erea office or regulered agent, e | n oong m me oune |
| 1. The name of | the corporation: Poe & Asso | ociates, Inc. | |
| 2. The principal | office address: 302 Knights R | un Avenue, Suite 700 | · · · · · · · · · · · · · · · · · · · |
| Ef <u>fective 7/</u> | 18/03 Tampa. FL 33 | 602 | |
| 3. The mailing a | address (if different): | | |
| 4. Date of incor | poration/qualification: _ 5/20/96 | Document number: | P96000043009 |
| | f street address of the current regist rtment of State: | ered agent and registered office of | n file with the |
| | | | |
| | 511 W. Bay Street | t, Suite 400 | |
| | Tampa, FL 33606 | | |
| 6. The name ar changed): | nd street address of the new regist | | registered office |
| Effective | Jan J. Meder | | 75 60 T |
| 7/18/03 | 302 Knights Run A | venue, Suite 700 | 是 是 |
| , | (P.O. Box or personal n | nailbox NOT acceptable) | 1:28 FLORIE |
| | Tampa, FL 33602 | | |
| The street addre agent, as chang | ess of its registered office and the sed will be identical. | street address of the business offi | ce of its registered |
| Such change wa authorized by th | as authorized by resolution duly ad ne board, or the corporation has be | lopted by its board of directors or en notified in writing of the chan | r by an officer so ige. |
| (Signature of an officer | , chairman or vice chairman of the board) | William F. Poe, Jr., Pr (Printed or typed name and title | esident e) |
| I hereby accept I further agree performance of registered agen office address, | the appointment as registered age to comply with the provisions of al my duties, and I am familiar with t. Or, if this document is being file thereby confirm that the corporate | ant and agree to act in this capac il statutes relative to the proper a and accept the obligation of my ed merely to reflect a change in i ion has been notified in writing o | ity. ind complete position as he registered of this change. |
| | ignature of Registered Agent) | //3/03 (Date) | |
| If signing on behal | | (Succ) | |

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

(Capacity)

(Typed or Printed Name)