• (Re	questor's Name)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
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(Cit	y/State/Zip/Phone	e #)
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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TRANSPORT

## **COVER LETTER**

TO: A'mendmer Division of	nt Section Corporations				
SUBJECT:	David Gerald Con	struction Com	pany, Inc.		
DOCUMENT NU	MBER:	P960000501	70		
The enclosed States	ment of Change of Registere	d Office/Agent and	fee are submitte	d for filing.	
Please return all con	rrespondence concerning this	s matter to the follow	wing:		
		oitha Eisenbeis			
	Name	of Contact Person			
	David Gerald C	onstruction Com	npany, Inc.		
		irm/Company		<del></del>	
	13309 Winding Oak Court				
		Address			
	Tampa, FL 33612 City/State and Zip Code				
City/State and Zip Code					
tabitha@davidgeraldconstruction.com					
E-mail address: (to be used for future annual report notification)					
For further informa	tion concerning this matter, p	olease call:			
Т	abitha Eisenbeis	at / 81	3 \	886-2935	
	ne of Contact Person	Area (	Code & Daytime	886-2935 Telephone Number	
Enclosed is a \$35.0	0 check made payable to the	Department of State	ð.		
	Mailing Address: Amendment Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231	ons Di CI 4 26	reet Address: mendment Sectivision of Corp ifton Building	orations  Center Circle	
		Ιċ	illahassee, FL 1	J <b>Z</b> JUI	

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

rsuant to the provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, 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.
The name of the corporation: David Gerald Construction Co. Inc.
The principal office address: 13309 Winding Oak Court, Tampa, FL 33612
The mailing address (if different):
Date of incorporation/qualification: 6/10/96 Document number: P960000050170
The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Rita M. Cabassa
13309 Winding Oak Court, Suite A 学名 号
The name and street address of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered agent (if changed) and /or registered office of the new registered office of the new registered agent (if changed) and /or registered office of the new registered of the new registered office of the new registered off
The summer was a second of the
(if changed):  Tabitha Eisenbeis
13309 Winding Oak Court, Suite A P.O. Box NOT acceptable
Tampa, FL 33612
e street address of its registered office and the street address of the business office of its registered agent, changed will be identical.
ch change was authorized by resolution duly adopted by its board of directors or by an officer so thorized by the board, or the corporation has been notified in writing of the change.
David J. Gerald, President  Signature of an officer or director  Printed or typed name and title
ereby accept the appointment as registered agent and agree to act in this capacity. urther agree to comply with the provisions of all statutes relative to the proper and complete performance my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this cument is being filed merely to reflect a change in the registered office address, I hereby confirm that the rporation has been notified in writing of this change.
Signature of Registered Agent Bate
signing on behalf of an entity:
Typed or Printed Name

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