

P96000059894

Requester's Name  
P.O. BOX 1829  
Address  
Lake City, FL 32051  
City/State/Zip Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ 600004666306--2  
(Corporation Name) (Document #) -11/05/01--01063--020  
\*\*\*\*\*35.00 \*\*\*\*\*35.00
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 NOV -5 AM 10:11

RA/RO Change  
Examiner's Initials (10)

11.7.01

**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,  
the undersigned corporation organized under the laws of the State of FLORIDA  
submits the following statement in order to change its registered office or registered agent, or both, in  
the State of Florida.

1. The name of the corporation : CLAY  
CONSTRUCTION & THERMAL SYSTEMS, INC.

2. The mailing address of the corporation : POST OFFICE BOX 1829, LAKE CITY, FL 32056

3. Date of incorporation/qualification: \_\_\_\_\_ Document number: P96000059894

4. The name and address of the current registered agent and office:

JOHN E. NORRIS  
201 N. MARION ST., STE. 301  
LAKE CITY, FL 32055

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P. O. Box Not Acceptable)

BRIAN P. SCHREIBER  
2 GUERDON RD., PO BOX 1829  
LAKE CITY, FL 32055

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.

X Doug Anderson  
(Signature of an officer, chairman or vice chairman of the board)

\_\_\_\_\_  
(Date)

M. DOUGLAS ANDERSON, VICE PRESIDENT  
(Printed or typed name and title)

*Having been named as registered agent and to accept service of process for the above stated  
corporation, I hereby accept the appointment as registered agent and agree to act in this capacity.  
I further agree to comply with the provisions of all statutes relative to the proper and complete  
performance of my duties, and I am familiar with and accept the obligation of my position as  
registered agent.*

X B-P. Schreiber  
(Signature of Registered Agent)

10/03/01  
(Date)

If signing on behalf of an entity:

BRIAN P. SCHREIBER  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314

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