(Re	equestor's Name)				
(Ad	dress)				
(Address)					
(Cit	ty/State/Zip/Phone	#)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Trimar Construction, Inc. (Name of corporation)	
DOCUMENT NUMBER: P96000063093	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Leslie Joughin, III, Esquire (Name of contact person)	
Akerman Senterfitt (Firm/Company)	
Post Office Box 3273 (Address)	·*
Tampa, Florida 33601-3273 (City/state and zip code)	*
For further information concerning this matter, please call:	
Judy Kalbfell, Assistant to Leslie at (813 ) 209-5071  (Name of contact person) Joughin, III (Area code & daytime telephone number)	
Enclosed is a \$35.00 check made payable to the Department of State.	

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

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

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

statement of chang	ovisions of sections 607.0502, 617.0502 e is submitted for a corporation organi o change its registered office or registe	ized under the laws of the	State of Florida
		T	
1. The name of the	corporation: Trimar Construc	etion, Inc.	- <del></del>
2. The principal of	ice address: 1720 W. Cass St.		
	Tampa, FL 33606		
3. The mailing add	ress (if different): P.O. Box 3052	2	
	Tampa, FL 33	3601-3052	
4. Date of incorpor	ation/qualification: 7/29/1996	Document number:	P96000063093
5. The name and str Florida Departm	reet address of the current registered agent of State:	gent and registered office	on file with the
	Leslie E. Joughin, II	[I	
	100 South Ashley Driv	•	
	Tampa, Florida 33602	2	TACH TACH
6. The name and str (if changed):	reet address of the new registered agen William J. Wagner	t (if changed) and /or regi	stered office ARY OF ARY
	WIIIIam O. Wagner		FLO E
	1720 West Cass Street (P.O. Box NOT acceptable)		RE 2
			7
-	Tampa, Florida 33606	=	
The street address as changed will be	of its registered office and the street a identical.	address of the business o	ffice of its registered agent,
Such change was a authorized by the b	nuthorized by resolution duly adopted poard, or the corporation has been not	by its board of directors tified in writing of the ch	s or by an officer so lange.
<u> </u>		William J. Wagn	er, President
I hereby accept the I further agree to to of my duties, and document is being corporation has be	rappointment as registered agent and comply with the provisions of all station familiar with and accept the office if the filed merely to reflect a change in the contified in writing of this change.	d agree to act in this cap ites relative to the proper gation of my position as e registered office addres	•
0-	100	July 29, 2005	<del></del>
(Signar	f of an entity:	, , , , (Da	œ)
Type	d or Printed Name)	*** 3_	

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