P97000002614

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
V	,	
(0)		- 49
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(2	and and and a	,
(Do	cument Number)	
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer	
Special instructions to	Filling Officer.	
		j
<u> </u>]

Office Use Only



200052271192

04/23/05--01017--016 **35.00

05 APR 28 AM 10: 51

R.A. Charge C. Coulliette MAY 0 5 2005

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Schoeppl & Burke, P.A. (Name of corporation)
DOCUMENT NUMBER: P9700002614
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:
Carl F. Schoeppl (Name of contact person)
Schoeppl & Burke, P.A.
(Firm/Company)
4651 North Federal Highway
(Address)
Boca Raton, Florida 33431-5133
(City/state and zip code)
For further information concerning this matter, please call:
Carl F. Schoeppl at (561) 394-8301 (Name of contact person) (Area code & daytime telephone number)
(Name of contact person) (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 Pivision of Corporations 409 E. Gaines Street Tallahassee, FL 32319

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.
I. The name of the corporation: Schoeppl & Burke, P.A.
2. The principal office address: 4651 North Federal Highway
Boca Raton, Florida 33431-5133
3. The mailing address (if different):
4. Date of incorporation/qualification: 01/10/1997 Document number: P9700002614
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Carl F. Schoeppl
4800 North Federal Highway, Suite 207-D
Boca Raton, Florida 33431-5178
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Carl F. Schoeppl
4651 North Federal Highway
(P.O. Box NOT acceptable) Boca Raton, Florida 33431-5133
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.
CARL F. SCHORPPL, President (Printed of typed name and title)
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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Jal F.S chappl 04/22/05
(Signature of Registered Agent) (Date) If signing on behalf of an entity:

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

(Typed or Printed Name)