## P97000066090

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SECRETARY OF STATE

R.A. Change

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## TRANSMITTAL LETTER

SUBJECT: TED GLASRUD ASSOCIATES OF DELAND, FL, INC.
(Name of corporation)
DOCUMENT NUMBER: P97000066090
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:
GERRY POHL
(Name of person)
TED GLASRUD ASSOCIATES, INC.
(Name of firm/company)
431 SOUTH 7TH STREET, SUITE 2470
(Address)
MINNEAPOLIS, MN 55415
(City/state and zip code)
For further information concerning this matter, please call:
GERRY POHL at (612 341-2651 (Area code & daytime telephone number)
(Name of 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 409 E. Gaines Street Tallahassee, FL 32399

TO:

Amendment Section Division of Corporations

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

	-	502, 617.0502, 607.1508, or 617.1508, Florida Statutes, rporation organized under the laws of the State of
FLORIDA	•	registered office or registered agent, or both, in the State
of Florida.	in order to change its	registered office or registered agent, or both, in the state
1. The name of	the corporation: TED GLASRI	UD ASSOCIATES OF DELAND, FL, INC.
		ONTE DRIVE, ORANCE CITY, FL 32763
3. The mailing a	address (if different): 431 SO	JTH 7TH STREET, SUITE 2470, MINNEAPOLIS, MN 55415
4. Date of incor	poration/qualification:7/29	/97 Document number:P97000066090
5. The name and Florida Depart	d street address of the current rather than the street address of the street addre	Document number: P97000066090 registered agent and registered office on file with the
	STACEY MANNING	
	124 TREEMONTE DR.	
	ORANGE CITY, FL 32763	The state of the s
6. The name ar changed):	nd street address of the new s	registered agent (if changed) and /or registered office (if
-	124 TREEMONTE DR.	
		rsonal mailbox NOT acceptable)
_	ORANGE CITY, FL 32763	
		the street address of the business office of its registered
Such change wa authorized by th	as authorized by resolution du ne board, or the corporation h	aly adopted by its board of directors or by an officer so as been notified in writing of the change.
There	Toll	GERRY POHL
. I	, chairman or vice chairman of the board)	(Printed or typed name and title)
I further agree performance of registered agen	to co <u>mply with the</u> provisions my duties, and I am familiar t. Or, if this documentis bei	d agent and agree to act in this capacity.  of all statutes relative to the proper and complete with and accept the obligation of my position as ng filed merely to reflect a change in the registered coration has been notified in writing of this change.
		FEBRUARY 27, 2003
	ignature of Registered Agent)	(Date)
If signing on behal THEODORE G.	•	PRESIDENT
(Typed or Printed Name)		(Canacity)

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