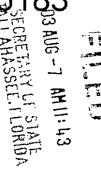
P97000068934

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



300022126183



08/117/113--n11731--nne: ***>5 00



TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Computerized Bookkeeping Serivces, Inc.
(Name of corporation)
DOCUMENT NUMBER: P97000068934
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:
Francine McCausland
(Name of person)
Computerized Bookkeeping Services, Inc.
(Name of firm/company)
1002 Oak Forest Drive
(Address)
Naples, FL 34104-4803
(City/state and zip code)
For further information concerning this matter, please call:
Francine McCausland at (239) 571-0247
(Name of person) at (239) 571-0247 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

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

this statement	of change is submitted for a corpo	02, 617.0502, 607.1508, or 617.1508, Florida Sto oration organized under the laws of the State of	-
Florida	in order to change its re	gistered office or registered agent, or both, in the	? State
of Florida.	- Computational F	Parkkanning Camilago Inc	
	f the corporation: Computerized E		
2. The principa	al office address: 1002 Oak Fores	t Drive, Naples, FL 34104-4803	
3. The mailing	address (if different): same		
4. Date of inco	orporation/qualification: 08/08/1	1997 Document number:P9700006893	34
	nd street address of the current reg artment of State:	gistered agent and registered office on file with the	53
	Michael R. Pinter		1 6
	4328 Corporate Square, Suite C	· ·	AUG-7
	Naples, FL 34104		是是
6. The name a changed):	and street address of the new rep	gistered agent (if changed) and /or registered off	fice (if 5
	1002 Oak Forest Drive		
	Naples, FL 34104-4803	nal mailbox NOT acceptable)	
The street add agent, as chan	ress of its registered office and the ged will be identical.	he street address of the business office of its regis	stered
Such charge vauthorized by	was authorized by resolution duly the board, or the corporation has	y adopted by its board of directors or by an office been notified in writing of the change.	r so
(Signature of an office	ber, chairman of vice chairman of the board)	Francine McCausland, Director (Printed or typed name and title)	
performance o revistered a s c	of my duties, and I am familiar w. ent. Or. if this document is heine	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 filed merely to reflect a change in the registered ration has been notified in writing of this change 08/05/2003	ł.
	(Signature of Registered Agent)	(Date)	_
If signing on beh	alf of an entity:		
	(Typed or Printed Name)	(Capacity)	

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