

P97000072436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

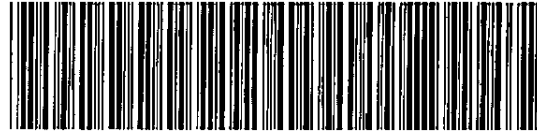
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200047936162

03/14/05--01025--012 **35.00

FILED
05 MAR 14 AM 8:32
TALLAHASSEE, FLORIDA

FILED

OK PA

MORRIS A. LECOMPTE, P.A.

ATTORNEY AT LAW
AAA BUILDING - SUITE 380
800 SECOND AVENUE SOUTH
ST. PETERSBURG, FLORIDA 33701
(727) 896-1000
FAX: (727) 896-1009

MORRIS A. LECOMPTE
e-mail Mlecompte@mlrp.com

March 9, 2005

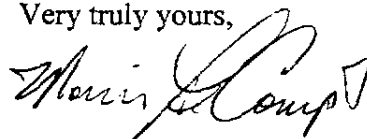
Florida Department of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Statement of Change of Registered Agent and Office

Dear Sir:

Enclosed please find the Statement of Change of Registered Agent and Office for Anderson, Riley & Spoor, P.A., along with a check in the amount of \$35.00 to cover the filing fee associated therewith. I trust the enclosures are sufficient to effectuate this change, but should you have any questions, please contact the undersigned.

Very truly yours,



Morris A. LeCompte

MAL/nf
Enclosures

**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.

1. The name of the corporation: Anderson, Riley & Spoor, P.A.
2. The principal office address: 6830 Central Avenue, Suite A
St. Petersburg, FL 33707
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 08/15/1997 Document number: 897000072436
(effective date)
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Robert Doyle
6830 Central Avenue, Suite A
St. Petersburg, FL 33707
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Morris A. LeCompte
800 - 2nd Avenue South, Suite 380
(P.O. Box NOT acceptable)
St. Petersburg, FL 33701

FILED
05 MAR 14 AM 8:32
TALLAHASSEE, FLORIDA
STATE

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.

Tony Anderson
(Signature of an officer or director)

TONY ANDERSON, PRESIDENT
(Printed or 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.

Morris A. LeCompte
(Signature of Registered Agent)

3/10/05
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314