## P97000089791

Requester's Name

Home
Instead

SENIOR CARE

1857 Wells Road
Suite 232

Office Use Only

Orange Park, FL 32073
CORPURATION NAME(S) & DOCUMENT NUMBER(S), (if known):

(Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
(Corporation Name)	(Document #)
4(Corporation Name)  Walk in Pick up time  Mail out Will wait	(Document #)  Certified Copy  Photocopy  Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials

## 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, the
undersigned corporation organized under the laws of the State of FL
submits the following statement in order to change its registered office or registered agent, or both, in the
State of Florida.
1. The name of the corporation: Fagan Foor Inc.
2. The mailing address of the corporation: 1857 Wells Rd. Suite 233
Orange Park, Fl. 32073
3. Date of incorporation/qualification: 27 Oct, 1997 Document number: 197760008979
4. The name and address of the current registered agent and registered office:
Lunne Facos
Lypne Fagan 301 Rio Pinar Tpail
0000 and 201 to 32174
5. The name and address of the new registered agent (if changed) and /or registered office (if changed):
Prichard R. Fagan
3408 N. Fairbanks Grant Pd.
Jacksonville, Fl 32223
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.
10112101
(Signature of an officer, chairman or vice chairman of the board) (Date)
JANJON ETTE FAGAN Power free (Printed or typed name and title)
The state of the s
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Kichard R. Fagard Capacity)  (Typed or Printed Name)  (Capacity)

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

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