P98000032033

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Decument Number)
(Document Number)
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SECULAR S- WHILE

COVER LETTER

TO: Amendmen Division of	t Section Corporations	
SUBJECT: Little	Gasparilla Water Utility, Inc.	ornoration)
	(i taine of ec	npolation)
DOCUMENT NUM	MBER: P98000032033	
The enclosed Staten	nent of Change of Registered Office	/Agent and fee are submitted for filing.
Please return all cor	respondence concerning this matter	to the following:
<u>1</u>	Mary Jo Elkins	·
_	(Name of Con	tact Person)
Underwood & Roberts, PLLC (Firm/Company)		
	(Timb Con	mpuny)
3′	110 Edwards Mill Road, Suite 1	100
<u>~</u>	(Addr	
R	aleigh, NC 27612	
_	(City/State and	d Zip Code)
For further informat	ion concerning this matter, please ca	all:
Mary Jo Elkins		at (919) 664-8803
	ne of Contact Person)	at (919) 664-8803 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00	check made payable to the Departr	nent of State.
	Moiling Address	Street Address
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
		Tallahassee, FL 32301

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida
in orde	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Little Gasparilla Water Utility, Inc.
	office address: Seafoam Village, Unit 111 2900 Placida Kd
Englewood	, FL 34224
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: 04/06/1998 Document number: P98000032033
	d street address of the current registered agent and registered office on file with the rtment of State:
	John Boyer
	1460 South McCall Road, Suite 2A
	Englewood, FL 34223
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	John Boyer
	Seafoam Village, Unit 111 2800 Placide Re
	Englewood, FL 34224
The street addr	ess of its registered office and the street address of the business office of its registered agent, I be identical.
Such change vauthorized by i	as authorized by resolution duly adopted by its board of directors or by an officer so find or the corporation has been notified in writing of the change.
	John Boyer
, -	t the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
`	5/1/08
(S	ignature of (registration Agent) (Date)
If signing on be	ehalf of an entry:
	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
CR2E045 (8/05)