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C.COULLIETTE MAY 2 8 2009

EXAMINER

COVER LETTER

	Amendment Section Division of Corporations				
SUBJECT	T: Florida Consolidated Agency, Name of Co	Inc rporation			
DOCUM	IENT NUMBER: CR2E045				
The enclos	osed Statement of Change of Registered Office	Agent and fee are submitted for filing.			
Please retu	turn all correspondence concerning this matter	to the following:			
	George J Tomascik Name of Con	tact Person			
Florida Consolidated Agency, Inc. Firm/Company					
500 Northpoint Parkway , Suite 200 Address					
West Palm Beach, FL 33407					
City/State and Zip Code					
David.Willbur@harboria.com E-mail address: (to be used for future annual report notification)					
	E-mail address: (to be used for fu	ture annual report notification)			
For furthe	er information concerning this matter, please ca	all:			
Davi	id Willbur	at (561) 623-6144 Area Code & Daytime Telephone Number			
	Name of Contact 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

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

statement of char	rovisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Singe is submitted for a corporation organized under the laws of the State of	Flor			
1. The name of th	ne corporation: Florida Consolidated Agency, Inc				
2. The principal of	office address: 500 Northpoint Parkway, Suite 200				
	West Palm Beach, FL 33407				
3. The mailing ad	dress (if different): 2222 Colonial Road, Suite 100				
 	Fort Pierce, FL 34950				
4. Date of incorpo	oration/qualification: 7/16/1999 Document number: P9800	00076	56 48	<u> </u>	
	street address of the current registered agent and registered office on file with ment of State: (If resigned, enter resigned)	h the			
	Corporation Service Company	-			
-	1201 Hayes Street				
	Tallahassee, FL 32301	EAS:	ο.		
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered offic	CRETAR LAHASS	09 MAY 26	·T.	
-	David Willbur	EO.			
	2222 Colonial Road, Suite 100	F S.I	<u> </u>	0	
	P.O. Box NOT acceptable Fort Pierce, FL. 34950				
The street address		regists	ered ac	rent	
	ss of its registered office and the street address of the business office of its be identical.			,cm,	
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an e board, or the corporation has been notified in writing of the change.	officer	so		
Signiture	George J. Tomascik, T Printed or typed name and titl	reasu	rer	_	
I further agree to of my duties, and document is bein corporation has	the appointment as registered agent and agree to act in this capacity. Occomply with the provisions of all statutes relative to the proper and come I am familiar with and accept the obligation of my position as registered of spiled merely to reflect a change in the registered office address, I hereby been notified in writing of this change. May 21, 2009 Date	plete po i agent. y confii	erform Or, i rm tha	ance f this t the	
If signing on bel	alf of an entity:				

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