

P98000090841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

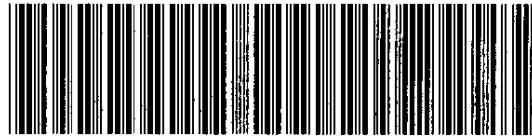
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

285
202
1/1
e

Office Use Only



200158342502

07/17/09--01009--011 **50.00

07/31/09--01046--001 **10.00

FILED
09 JUL 29 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RAEL
7/29/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CNT Services, Inc.
Name of Corporation /

DOCUMENT NUMBER: 98000090841

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:

Charles N. Terry.
Name of Contact Person

CNT Services, Inc.
Firm/Company

1140 Southland Rd.
Address

Venice FL 34293
City/State and Zip Code

cterry66@msn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles N. Terry at (941) 809-4366
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 23, 2009

CHARLES N. TERRY
1140 SOUTHLAND ROAD
VENICE, FL 34293

SUBJECT: CNT SERVICES, INC.
Ref. Number: P98000090841

We have received your document for CNT SERVICES, INC. and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 009A00025379

**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: CNT Services, Inc.
2. The principal office address: 144 Triple Diamond Blvd. Unit E
N. Venice Fl. 34275
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/23/1998 Document number: 98000090841

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Ronald Hogarth
200 Capri Isles Blvd.
Venice Fl. 34292

FILED
09 JUL 29 PM 3:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Charles N. Terry
1140 Southland Rd
P.O. Box NOT acceptable
Venice Fl. 34293

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.

Charles Terry
Signature of an officer or director

Charles Terry 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.

Charles Terry
Signature of Registered Agent

July 27 / 2009
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
CR2E045 (8/05)