

P99 00000 4334

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

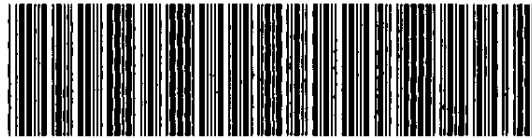
(Business Entity Name)

(Document Number)

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10 APR 20 PM 1:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PA Change

B. GONNERS APR 21 2010

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Pine Earth Forestry, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P99000004334

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:

Julie Hodge  
Name of Contact Person

P99000004334  
Firm/Company

4351 NE 176<sup>th</sup> Ave  
Address

Williston, FL 32696  
City/State and Zip Code

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

For further information concerning this matter, please call:

Julie Hodge at (352) 528-2699 ext 29  
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**

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: PineEarth Forestry, Inc.
2. The principal office address: 20991 NE Hwy 27  
Williston, FL 32696
3. The mailing address (if different): P.O. Box 640  
Williston, FL 32696
4. Date of incorporation/qualification: 1/13/99 Document number: P99000004334
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)

Steven M. Chamberlain  
618 NE 1st ST  
Gainesville, FL 32601

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

Terence J. Kann  
2790 NW 43rd St. Suite 100  
P.O. Box NOT acceptable  
Gainesville, FL 32606


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.

  
Signature of an officer or director

Julie Hodge, Secty.  
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.*

  
Signature of Registered Agent

2/2/10  
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)

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10 APR 20 PM 1:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA