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COVER LETTER

Division of Corporations		
SUBJECT: Boca Grande Partners Inc. Name of Corporation		
DOCUMENT NUMBER: P 99 6000 31884		
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:		
Christine Mac Donald Administrator Name of Contact Person		
Gasparilla Properties, Inc.		
P.O. Box 1364, 411 Park Ave Ste 3		
Boca Grande FL 33921 City/State and Zip Code		
Cmacdonald @ gas parilla proper fies. com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Christine Mac Donald, Administrator at (941) 964-5650 Name of Contact Person Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.		

Street Address: Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

CR2E045 (8/05)

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

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: Boca Grande Partners Inc.
2. The principal office address: 411 Park Avenue Suite 3
Boca Grande, FC 33921
3. The mailing address (if different): P.o. Box 1364
Boca Grande, FC 33921
4. Date of incorporation/qualification: 2/19/09 Document number: P990000 3/884
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)
Carol Skwart
350 Gasparilla Street
Boca Grande FL 33921
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Bobert A. Melvin IV
HII Park Avenue, Suite 3 P.O. Box NOT acceptable
Boca Grande, FL 33921
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.
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 appropriation has been notified in writing of this change. Signifure of Registered Agent Printed or typed name and title I hereby accept the appointment 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 appropriate in the registered office address. Date
If signing on behalf of an entity:
Typed or Printed Name

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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