517298

·					
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Dasiness Entry Name)					
(Document Number)					
(Document Namber)					
Cadifical Carian Cadification of Status					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



700024561467

11/12/03--01062--005 **35.00

J3 HOW 12 AM 8: 13

R/A Ohg: VMM 1/18/03

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: REMPROP, INC. (Name of corporation)					
DOCUMENT NUMBER: S17298					
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:					
C. SCOTT NALL					
(Name of person)					
C CCOMPINALL DA					
C. SCOTT NALL, P.A. (Name of firm/company)					
1811 N. BELCHER ROAD, SUITE I-2					
(Address)					
CLEARWATER, FL 33765					
(City/state and zip code)					
For further information concerning this matter, please call:					
C. SCOTT NALL at (727) 799-9727 (Name of 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 Tallabassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallabassee, FL 32314					

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

change is subm	uitted for a corporation organized under th		es, this statement of in order	
to change its re	gistered office or registered agent, or bot	h, in the State of Florida.		
1. The name of	the corporation: REMPROP, INC.			
2. The principa	office address: 2095A DREW ST., CL	EARWATER, FL 33765		
		4.		
3. The mailing	address (if different): P.O. BOX 6163, C	CLEARWATER, FL 33758		
Ü		-		
4. Date of incor	poration/qualification: 12/10/1990			
	d street address of the current registered a rtment of State:	gent and registered office on file with the		
	RICHARD E. METZ, SR.			
	2095A DREW ST.	<u> </u>	03 1	
	CLEARWATER, FL 33765		- 45 TA	
6. The name and (if changed):	d street address of the new registered ager	nt (if changed) and /or registered office	AM 8:	
	C. SCOTT NALL, P.A.	in the second se	_ 器 3	
	1811 N. BELCHER ROAD, SUITE I-	2		
(P.O. Box or personal mailbox NOT acceptable)				
	CLEARWATER, FL 33765			
The street addre	ess of its registered office and the street	address of the business office of its regis	stered agent, as	
Such change w	as authorized by resolution duly adopted	l by its board of directors or by an office g of the change.	er so authorized by	
	e corporation has been horned in writin	LISA A. NALL, VP		
	Signature of an officer or director)	(Printed or typed name an	•	
I hereby accept I further agree duties, and I am being filed mer been notified in	the appointment as registered agent an to comply with the provisions of all state familiar with and accept the obligation by to reflect a change in the registered writing of this change.	d agree to act in this capacity, utes relative to the proper and complete a of my position as registered agent. Or, office address, I hereby confirm that the	performance of my if this document is corporation has	
all	<u></u>	11/3/2003		
1 <i>1</i>	(Signature of Registered Agent)	(Date)		
If signing on be	half of an entity:	-		
C. SCOTT NA		PRESIDENT		
	(Typed or Printed Name)	(Capacity)		

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