## 526222

(Re	equestor's Name)	-
(Ad	ldress)	······································
(Ad	ldress)	
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(Cil	ty/State/Zip/Phone	e # <i>)</i>
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SCLEBIARY OF STATE ALLIAHASSEE, FLORIDA

R.A. Change

T BROWN DEC 2 7 2005

## **COVER LETTER**

TO: Amendment Sec Division of Corp	ction corations				
SUBJECT:		oway & Co.			
	(Maine of C	corporation)			
DOCUMENT NUMBE	CR:	6222			
The enclosed Statement	of Change of Registered Offic	ee/Agent and fee are submitted for filing.			
Please return all corresp	ondence concerning this matte	r to the following:			
Daniel L. DeCubellis					
	(Name of Co	ntact Person)			
	DeCubellis, Meel	(s & Uncapher, P.A.			
<del></del>	(Firm/C	ompany)			
	837 North Ga	arland Avenue			
	(Ado	dress)			
	,				
	Orlando, Florid	da 32801-1003			
	(City/State a	nd Zip Code)			
For further information	concerning this matter, please	call:			
	L. DeCubellis	at ( 407 ) 872-2200 (Area Code & Daytime Telephone Number)			
(Name o	f Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 obs	eck made payable to the Depar	tment of State			
Enclosed is a \$35.00 cir	ek made payable to the Depar	then of State.			
		G1			
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Division of Corporations	Division of Corporations			
	P.O. Box 6327	Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

TO:

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

statement of char	provisions of sections 607.0502, 617. nge is submitted for a corporation of r to change its registered office or re	rganized under the laws of the	e State of Florida	
1. The name of the	he corporation; Dwight Holloway	& Co.		
2. The principal of	office address: 114 South Park C	circle, Suite D, Winter Par	k, Florida 32789	
3. The mailing ac	ddress (if different):			
4. Date of incorp	oration/qualification: 1/22/1991	Document number:	S26222	
5. The name and Florida Depart	street address of the current register tment of State:	red agent and registered office		
	Dwight	t D. Holloway	SECT FALL	! •
	948 Poin	iciana Avenue	AHAR	; _ =
	Winter Par	rk, Florida 32789	RY OF	=
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or reg	ristered office FLORID	FICE MILEST
	Daniel L. I	DeCubellis		
	837 North Ga			
	(P.O. Box NOT accept Orlando, Florid			
	se of its registered office and the state of its registered office and the state of its registered by resolution duly added to be a state of the corporation has been	reet address of the business		
1/16	re of an officer or dylector)	DWIGHT D.	Holloway, PRES,	
I hercby accept to a light the second of the	the appointment as registered agen to comply with the provisions of all If I am familiar with and accept the ig filed merely to reflect a change i been notified in writing of this cha	n and agree to act in this cap statutes relative to the prope obligation of my position as in the registered office addre unge.	pacity er and complete performance s registered agent. Or, if this ess, I hereby confirm that the	?
<u> </u>	-XX	12-8-05		
	nature of Registered Agent)	(D:	ate)	
If signing on beh	Sells  yped or Printed Name)	··	±	

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