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Division of Corporations

FAX NO.

329026

P. 01

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : BATTAGLIA ROSS CORPORATE
Account Number : I20000000275
Phone : (727) 381-2300
Fax Number : (727) 343-4059

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

STARKEY ROAD, INC.

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Starkey Road, Inc.
Name of Corporation

DOCUMENT NUMBER: S29026

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:

Howard P. Ross, Esq.
Name of Contact Person

Battaglia, Ross, Dicus & Wein, P.A.
Firm/Company

980 Tyrone Blvd.
Address

St. Petersburg, FL 33703
City/State and Zip Code

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

For further information concerning this matter, please call:

Howard P. Ross, Esq. at (727) 381-2300
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

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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: Starkey Road, Inc.
2. The principal office address: 11900 Starkey Rd., Largo, FL 33773
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/1/91 Document number: S29026
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)

David S. Johnson, Esq.100 N. Tampa St., Suite 2900Tampa, FL 33602

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

Resident Agent Corporation of Pinellas County, Inc.980 Tyrone Blvd.

P.O. Box NOT acceptable

St. Petersburg, FL 33710

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TALLAHASSEE, FLORIDA

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

Joanne Greenberg, 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.


Signature of Registered Agent

8/5/09
Date

If signing on behalf of an entity:

Howard P. Ross, Vice-President

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

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