

5360234

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

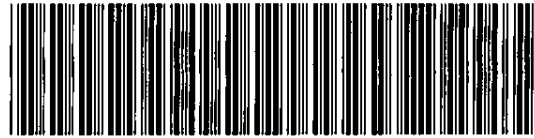
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000189048470

12/29/10--01005--008 \*\*35.00

RECEIVED  
10 DEC 29 PM 4:51  
TAXPAYER SERVICE CENTER  
JAN 4 2011

20  
1/4/11  
TC

**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: Custom Financial Services, Inc.

2. The principal office address: 10471 Six Mile Cypress Pkwy Suite 407  
Fort Myers, FL 33966

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 2/27/1991 Document number: S36234

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 Ann McIltrout  
10501 Six Mile Cypress Pkwy Suite 104  
Fort Myers, FL 33966

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

Carol Ann McIltrout  
10471 Six Mile Cypress Pkwy Suite 407  
P.O. Box NOT acceptable  
Fort Myers, FL 33966

10 DEC 29 PM 4:51  
RECEIVED  
FLORIDA DEPARTMENT OF STATE

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.

Carol A McIltrout  
Signature of an officer or director

Carol Ann McIltrout, 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.*

Carol A McIltrout  
Signature of Registered Agent

December 21, 2010  
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)

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Custom Financial Services, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** S36234

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:

Carol Ann McIltrout  
Name of Contact Person

Custom Financial Services, Inc.  
Firm/Company

10471 Six Mile Cypress Pkwy Suite 407  
Address

Fort Myers, FL 33966  
City/State and Zip Code

carolann.mciltrot@raymondjames.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carol Ann McIltrout at ( 239 ) 277-0708  
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