## 561446

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## **COVER LETTER**

Division of Corporations					
SUBJECT: Vanguard Medical Concepts, Inc.					
(Name of corporation)					
DOCUMENT NUMBER: S61446					
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:					
Charles A. Masek, Jr.  (Name of contact person)					
Vanguard Medical Concepts, Inc. (Firm/Company)					
5307 Great Oak Drive					
(Address)					
Lakeland, FL 33815 (City/state and zip code)					
•					
For further information concerning this matter, please call:					
Charles A. Masek, Jr. at (863 ) 683-8680  (Name of contact person) (Area code & daytime telephone number)					
(Name of contact person) at (863 ) 663-6666 (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
409 E. Gaines Street
Tallahassee, FL 32399

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

statement of char	nge is submitted for a corporation organiz	• • • • • • • • • • • • • • • • • • • •	a	
	r to change its registered office or register the corporation: Vanguard Medical Concerns	•		
	office address: 5307 Great Oak Drive, La			
2. The principal	office address: 3307 Great Oak Brive, Ea	arcialiu, FL 33013		
3. The mailing ac	ddress (if different): Same			
4. Date of incorp	oration/qualification: 06/19/91	Document number: S61446		
5. The name and Florida Depart	street address of the current registered ago ment of State:	ent and registered office on file with the		
	David H. Galloway, Esq.		o	
	506 N. Alexander Street		TUA TUA 4 DE	
	Plant City, FL 33563		04 DEC -8 PM 1:50 SUCRETARY OF STATE ALLAHASSEE, FLORID	 בר ני
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				ŗ
	Charles A. Masek, Jr.		1:50 STATE LORIDA	
	5307 Great Oak Drive		-	
	(PO Box NOT acceptable)			
	Lakeland, FL 33815			
The street addre	ss of its registered office and the street a be identical.	ddress of the business office of its regis	stered agent,	
	s authorized by resolution duly adopted e board, or the corporation has been noti	by its board of directors or by an office fied in writing of the change.	r so	
5/10	e of an officer or director)	Charles A. Masek, Jr., President & CE	<u> </u>	
I hereby accept I further agree t of my duties, and document is beit corporation has	the appointment as registered agent and o comply with the provisions of all statud I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change.	agree to act in this capacity. tes relative to the proper and complete tation of my position as registered agen registered office address, I hereby con	performance it. Or, if this firm that the	
<u> </u>	ran	December 3, 2004		
If signing on bel	nature of Registered Agent) nalf of an entity:	(Date)		

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