

574941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

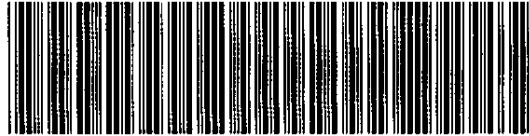
(Business Entity Name)

(Document Number)

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10 JUL -8 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

RD 7/13/10
TC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BREVARD PLATE GLASS, INC.
Name of Corporation

DOCUMENT NUMBER: S74941

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:

RICHARD G. STORY

Name of Contact Person

BREVARD PLATE GLASS, INC.

Firm/Company

843 N. Cocoa Blvd.

Address

Cocoa, Florida 32922

City/State and Zip Code

storyr1@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard G. Story

Name of Contact Person

at (321) 544-4768

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

**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: BREVARD PLATE GLASS, INC.
2. The principal office address: 843 N. Cocoa Blvd.
Cocoa, Florida 32922
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/01/1991 Document number: S74941

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)

Susan M. Story

843 N. Cocoa Blvd.

Cocoa, Florida 32922

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

Linda R. Powers

843 N. Cocoa Blvd.

P.O. Box NOT acceptable

Cocoa, Florida 32922

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.

Richard G. Story
Signature of an officer or director

Richard G. Story, Vice 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.

Linda R. Powers
Signature of Registered Agent

7-6-10
Date

If signing on behalf of an entity:

Bret T. Wylie, Secretary

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)

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA