## 112646

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Cashiota Zinit, Namo)
(Document Number)
(Document Number)
Continue Con
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500112976085

12/14/07--01040--007 \*\*35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

007 DEC 17 PM 12: 5:

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Scott D. Bonk and Associates, Inc. (Name of Corporation)
DOCUMENT NUMBER: V12646
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:
Scott D. Bonk (Name of Contact Person)
Scott D. Bonk and Associates, Inc. (Firm/Company)
11239 Paddington TERRACE (Address)
Fort Myers, P2 339/3 (City/State and Zip Code)
For further information concerning this matter, please call:
Scott D. Bolk (Name of Contact Person) at (239) 765 - 3654 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

CR2E045 (8/05)

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

statement of change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Scott D. Bouk and Associates, Inc.
2. The principal office address: 1141 Gateway Bowleard Suite 102 Fort Myers, Florida
3. The mailing address (if different): 11239 Paddington Terrence Fort Myers, Forida 33913
4. Date of incorporation/qualification: Document number:
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Scott D. BONK
12770 Allendale Ctrole
& Fort Myers, Frontal 30912 Fig. 3
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Sect D. Bonk
Scott D. Bonk  11239 Paddington Texence  (P.O. Box NOT acceptable)  Fort Myers, Plaida 33913
Port Myers, PlaidA 33913
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)  Scott D. Bonk - PROUDENT (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) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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