V22377

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SECRETARY OF STATE

R.A. Change

TB 7/28/08

· COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: PHOENIX ASSOCIATES OF SOUTH FLORIDA, INC.				
(Name of Corporation)				
DOCUMENT NUMBER: V22377				
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:				
BRIAN HOWELL				
(Name of Contact Person)				
PHOENIX ASSOCIATES OF SOUTH FLORIDA, INC.				
(Firm/Company)				
2960 IMMOKALEE ROAD				
(Address)				
NAPLES FL 34110 US				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Terrane and the manner of the manner, prease turn				
BRIAN HOWELL at (239 596-9111 (Area Code & Daytime Telephone Number)			
(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	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
	Tallahassee, FL 32301			

TO:

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

statement of cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation orga r to change its registered office or regist	nized under the laws of the State of _	<u> </u>
1. The name of t	the corporation: PHOENIX ASSOCIATE	S OF SOUTH FLORIDA, INC.	
2. The principal NAPLES FL	office address: <u>2960 IMMOKALEE ROA</u> . 34110 US	AD.	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 03/19/1992	Document number: V22377	
	d street address of the current registered attment of State:	agent and registered office on file with	h the
	MCVICKER, KEVIN		
	2960 IMMOKALEE ROAD		_
	NAPLES FL 34110 US		2008 TAL
6. The name and (if changed):	d street address of the new registered age	ent (if changed) and /or registered offi	2000 JUL 22 SECRETARI TALLANASS
	HOWELL, BRIAN		. Р _е - п
	2960 IMMOKALEE ROAD		FLORA -
	(P.O. Box NOT acceptable NAPLES FL 34110 US	c)	RE OS
	ess of its registered office and the stree l be identical.		
authorized by t	as authorized by resolution duly adopt he board, or the corporation has been n	otified in writing of the change.	Officer so
(Signal	turg of an officer or director)	RANDY JOHNS, VD (Printed or typed name and t	title)
I hereby accept I further agree	t the appointment as registered agent a to comply with the provisions of all sto nd I am familiar with and accept the ob- ing filed merely to reflect a change in the been notified in writing of this chang	nd agree to act in this capacity, tutes relative to the proper and con	nnlete performance
	enalf of an entity:	(Date)	
BRIAN HOW	t ·		

* * * 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)