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THE FINCH MAN, INC. Application Comparison Compari			V27655	(2)				
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Since Age #, etc. Such Age #, etc. Such Age #, etc. Such Age #, etc. Such Address of Status Desired See Required Fee Required See Required	Principal Plac			The contract of the contr	1000	4. FEI Number		Applied For
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HINES, JAMES P. 315 SOUTH HYDE PARK AVENUE TAMPA R. 33808 81 Name Back Sirect Address (P.O. Box Number is Not Acceptable) 82 Sirect Address (P.O. Box Number is Not Acceptable) 83 Day Back Back Day B	New 1	Co	untry 1	Zip	Country	8. This corporation has liability of	or intangible tax und	
HINES, JAMES P. 315 SOUTH HYDE PARK AVENUE TAMPA FL 33806 84 City FL 85 Zip Code 11. Presuant to the preservors of Sections 607 (552 and 66) 1508. Florids Statutes, the allower named composition submits this statement for the purpose of changing dis registered agent, or both in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, i amit accept the obligations of, Section 1607 (5005, Florid). Statutes SIGNATURE 12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 12. OR FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 12. OR FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 14. OR FILE ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 14. OR FILE ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 14. OR FILE ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 14. OR FILE ADDITIONS/CHANGES TO OF FICERS AND DIRECTORS IN 12 15. THE ADDITIONS AND ADDITIONS	34600	9. Name and A				110 100 01011110		<u> </u>
The Pursuant to the provisions of Sections 607 (0.552 and 607) (1508, Fourth Statutes, the above named corporation submits this statement for the purpose of Changing its registered office or registered agent, or both, in the State of Fonds. Such change was anthroved by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the collapsions of Science (07 (0.60), Floreth Statutes. SIGNATURE SIGNATURE 12.	315 SOUTH HYDE PARK AVENUE		83		les Zo Codo			
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CITY ST-ZIP 64-01-15 dr. 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further 15. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further 15. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further 15. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further 15. I do hereby certify that the information supplied with this filing is voluntarily furnished.	315 SOL TAMPA F 1. Pursuant to or registere familiar with SIGNATURE. 2. ITLE LAME STREET ADDRESS CITY-ST-ZIP LITLE LAME STREET ADDRESS CITY-ST-ZIP LITLE NAME	TH HYDE PARI FL 33606 In the provisions of diagent, or both, in, and accept the complete of t	Sections 607.0502 and the State of Florida biligations of, Section OFFICERS AND ED. E. CREEK TRAIL K, BARBARA E. CREEK TRAIL	DELETE DELETE DELETE	83 84 City the above named corporaty the corporation's boal 13. 1 1 Titte 12 NAME 13 STREET ADDRESS 14 City-St 2iP 2 1 Titte 22 NAME 23 STREET ADDRESS 24 City-St 2iP 3 1 Titte 32 NAME 33 STREET ADDRESS 34 City-St 2iP 4 1 Titte 42 NAME 43 STREET ADDRESS 44 City-St 2iP 5 1 Titte 52 NAME 53 STREET ADDRESS 54 City-St 2iP 5 1 Titte 52 NAME 53 STREET ADDRESS 54 City-St 2iP 6 1 Titte 62 NAME	ration submits this statement for the part of directors. Thereby accept the ap	Courpose of changing repointment as regis CATE	g its registered office tered agent. I am COTORS IN 12 ange Addition ange Addition ange Addition ange Addition