# Requester's Name Carol Waters Enterprises, Inc. 1339-R West Washington St.. Orlando, Florida 32805 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Walk in Pick up time

### **NEW FILINGS**

Mail out

Profit
Not for Profit
Limited Liability

Will wait

Domestication

**□** Other

# OTHER FILINGS

Annual Report
Fictitious Name

#### **AMENDMENTS**

Photocopy

Amendment

Resignation of R.A., Officer/Director
Change of Registered Agent

Dissolution/Withdrawal

Merger

## REGISTRATION/QUALIFICATION

Foreign

Limited Partnership

Reinstatement
Trademark

Other

**Examiner's Initials** 

Certificate of Status

10/15/01

CR2E031(7/97)

# 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, the undersigned corporation organized under the laws of the State of Ploids
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.  1. The name of the corporation: Carol Waters Enterprises, June.
2. The mailing address of the corporation: 1339-P West Washington St
Oclando, Lorida 32805
3. Date of incorporation/qualification: 05/05/1992 Document number: V33768
4. The name and address of the current registered agent and office:
Grocock J. Bennett P. A.
_ 205 E Cential Blod Suite 601
<u>Oclando, L 32801</u>
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  (P. O. Box Not Acceptable)
7/10 to 400 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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Ollarko, & 32805
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.
(Signature of an officer, chairman of the heard)  (Date)
(Signature of an officer, chairman or vice chairman of the board) (Date)
CAROL J. WATERS, D/P/S/VP  (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. 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.
Caral Data
(Signature of Registered Agent) (Date)
f signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *
P2E045(9/00)

P.O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS