## 

(Requestor's Name)	300157833403		
(Address)			
(Address)	300137033403		
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL	06/29/0901040001 **70.00		
. (Business Entity Name)	The state of the second terms of the second te		
(Document Number)	SECRITALLA		
	1) 29 HASSE		
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Special Instructions to Filing Officer:			
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Office Lise Only	1010 har 0		

## **COVER LETTER**

TO:	Amendment Section Division of Corpor	on Pations					
SUBJECT: Vanderbilt Development, Inc.  Name of Corporation							
		Name of C	orporation				
DOC	UMENT NUMBER	\	/70630				
The e	nclosed Statement of	Change of Registered Office	e/Agent and fee are subm	itted for filing.			
Please	e return all correspon-	dence concerning this matter	to the following:				
		Beth	Pratt				
	Name of Contact Person						
	Vanderbilt Development,Inc.						
		Firm/Co	ompany	· <del>···</del>			
		4601 Enterpris	se Ave. Unit 1				
		Ádd	ress				
	Naples, Florida 34104 City/State and Zip Code						
		beth@vander	biltdev.com				
	E-mail	address: (to be used for f	uture annual report noti	fication)			
For fu	irther information coi	ncerning this matter, please of	eall:				
	,	h Pratt	at ( 239 )	566-1616 ime Telephone Number			
	Name of Co	ontact Person	Area Code & Dayt	ime Telephone Number			
Enclo	sed is a \$35.00 check	made payable to the Depart	ment of State.				
	M	ailing Address: nendment Section	Street Address Amendment S	<u>E</u>			
		vision of Corporations	Division of C				
		O. Box 6327	Clifton Buildi				
		Illahassee, FL 32314		ve Center Circle			

Tallahassee, FL 32301

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

statement of cha	ange is submitted for a cor	poration organiz	, 607.1508, or 617.1508, Florid ted under the laws of the State of ted agent, or both, in the State of	of Floirda
1. The name of	the corporation: Vande	rbilt Develo	pment,Inc.	
	office address: 21011 J	a	t Unit 110	
3. The mailing a	address (if different):	·		
4. Date of incor	poration/qualification:	1992	Document number:	V70630
	d street address of the curr rtment of State: (If resigne		ent and registered office on file	with the
	Eric Morales			2
	15101 S.W. 27th St			DOD JI
	Davie, Florida 3333	34		JI) 29 JI) 29 E TAR HASS
6. The name and (if changed):	d street address of the new	registered agent	(if changed) and /or registered	2009 JUD 29 AM 8: 1: SECRETARY OF STATI TALLAHASSEE, FLORI
	Eric Morales			_ BA 3
	20401 SW 52nd Str			<b>P</b>
	Pembroke Pines, Fl	P.O. Box NOT orida 3332	acceptable	
The street address changed will	ess of its registered office be idenfical.	and the street a	ddress of the business office of	of its registered agent,
Such change wa authorized by t	as anthorized by resolution the board, or the corporation of the corpo	on duly adopted on has been noti	by its board of directors or by fied in writing of the change.  Eric Morales, P	
I hereby accept I further agree of my duties, ar document is be corporation has	the appointment as regis to camply with the provis ad I am familiar with and ing filed merely to reflect s been notified in writing	tered agent and ions of all status accept the oblig a change in the of this change.	agree to act in this capacity. tes relative to the proper and ation of my position as regist registered office address, I he	complete performance ered agent. Or, if this ereby confirm that the
If signing on be	chalf of an entity:		June 17,20 Date	009
Fric T	VIOCULES			

\* \* \* 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)