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NEW FILINGS	AMENDMENTS.		
Profit	Amendment		
NonProfit	Resignation of R.A., Officer/ Dia	irector	
Limited Liability	Change of Registered Agent		
Domestication	Dissolution/Withdrawal		
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OTHER FILINGS  Annual Report	REGISTRATION/ QUALIFICATION		<i>A</i>
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Florida Department of State, Sandra B. Mortham, Secretary of State

## 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 $F/6Y$ ide
submits the following statement in order to change its registered office or registered agent, or both, in the
1. The name of the corporation is: Imperial Manor Condomination
Incorporated
2. The mailing address of the corporation is: 1015 Ingraham Ave #7  Delvay Beach FL 33483
Incorporated  2. The mailing address of the corporation is: 1015 Ingra ham Ave #7  Delvay Beach FL 33483  3. Date of incorporation/qualification: November 3,1964 Document number:  4. The name and address of the current registered agent and office:  George Culp (Deceased)  1015 Ingraham Ave #4
George Culp (Deceased)
George Culp (Deceased)  1015 Ingraham Ave #4
Delray Beach FL 33483
5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)
James H. McKee President
James H. McKee, President  1015 Ingraham Ave. #7
Delray Beach FL 33483
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 or vice chairman of the board) (Date)
(Signature of an officer, chairman or vice chairman of the board) (Date)
James H. McKee President (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. 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.
Signature of Registered Agent)  (Date)
(Carry)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
CR2E045(1/95) FILING FEE: \$35.00