

769484

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

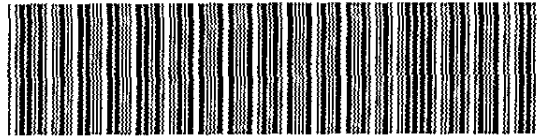
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/24/03--01034--008 **35.00

FILED
03 MAY 12 AM 4: 00
TALLAHASSEE, FLORIDA

RO/RA Change
@ 5/12/03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Winegard Inc
(Name of corporation)

DOCUMENT NUMBER: 769484

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:

Mary A Tomengo or Parmanand Singh
(Name of person)

Winegard Inc % Amvin Real estate Service
(Name of firm/company)

6060 S Orange Ave
(Address)

Orlando , FL , 32809
(City/state and zip code)

For further information concerning this matter, please call:

Mary Tomengo at (407) 854 8990
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
03 MAY 12 AM 4:00
FILED



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 28, 2003

MARY A TOMENGO
WINEGARD INC.
6060 S ORANGE AVE.
ORLANDO, FL 32809

SUBJECT: WINEGARD, INC.
Ref. Number: 769484

We have received your document for WINEGARD, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 903A00025703

RECEIVED

03 MAY 12 PM 12:01

DIVISION OF CORPORATIONS

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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Winegard Inc
- 2. The principal office address: 6060 S Orange Ave
Orlando, FL 32809
- 3. The mailing address (if different): Same as above

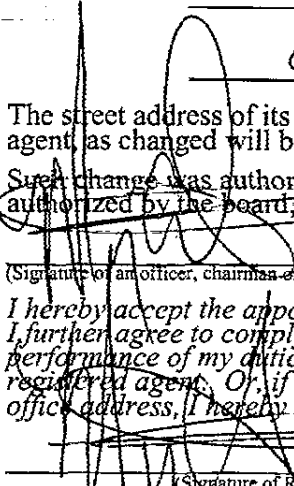
4. Date of incorporation/qualification: July 22, 1983 Document number: 769484

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Florida Property Management
7611 South Orange Blossom Trail, STE 168
Orlando, FL 32809

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Parmanand Singh
6060 S Orange Ave
(P.O. Box or personal mailbox NOT acceptable)
Orlando FL 32809

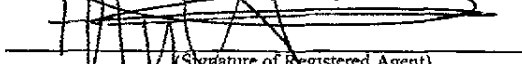
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

~~Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.~~


(Signature of an officer, chairman or vice chairman of the board)

MARY A. LOMENGO, TREASURER
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

4-21-2003
(Date)

If signing on behalf of an entity:
MARY A. LOMENGO
(Typed or Printed Name)

TREASURER
(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILED
03 MAY 12 AM 4:00
TALLAHASSEE, FLORIDA