

830666

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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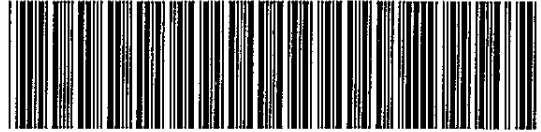
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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CARLTON FIELDS

ATTORNEYS AT LAW

ONE HARBOUR PLACE
777 S. HARBOUR ISLAND BOULEVARD
TAMPA, FLORIDA 33602-5730

MAILING ADDRESS:
P.O. BOX 3239, TAMPA, FL 33601-3239
TEL (813) 223-7000 FAX (813) 229-4133

May 23, 2003

Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

Re: Douglas N. Higgins, Inc.

Dear Sir or Madam:

Enclosed please find an original and a copy of a "Statement of Change of Registered Office or Registered Agent or Both for Corporations" with regard to the above-named corporation. I have also enclosed my firm's check in the amount of \$35.00 to cover the filing fee. Please return a date stamped copy of the Statement to my office in the enclosed stamped self-addressed envelope.

If you have any questions or concerns, please do not hesitate to call me. Thank you for your assistance in this matter.

Sincerely,



Paul J. Ullom

PJU:blh

Enclosures

cc: Dan Higgins (w/ copies of enclosures)

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 Michigan 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 : Douglas N. Higgins, Inc.

2. The mailing address of the corporation : 3380 Travis Pointe Road, Suite A
Ann Arbor, Michigan 48108

3. Date of incorporation/qualification: 1 Aug 73 Document number: 830,666

4. The name and address of the current registered agent and office:

Robert J. Kelly, P.A.
415 Vinnedge Ride
Tallahassee, Florida 32302

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5. The name and address of the new registered agent (if changed) and/or registered office (if changed) (P. O. Box Not Acceptable)

CFRA, LLC
One Harbour Place, 777 S. Harbour Island Blvd., Suite 500
Tampa, Florida 33602-5730

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.

James H. Sweet
(Signature of an officer, chairman or vice chairman of the board)

5/6/03
(Date)
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

James H. Sweet, Vice-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]
(Signature of Registered Agent) 5/6/03
(Date)

If signing on behalf of an entity:
Paul Ullom on behalf of CFRA, LLC Agent
(Typed or Printed Name) (Capacity)

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