

**A01000000858**

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August 15, 2002

Please refer to our file number:  
12037-1  
Writer's Direct Line:  
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Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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-08/21/02--01038--001  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Re: J & P Corcoran Family Partnership, LLLP

Dear Sir or Madam:

Enclosed please find an original and duplicate **Statement of Change** for the referenced Limited Liability Limited Partnership, together with a check in the amount of \$35.00 to cover the filing of the Statement.

Please return a date-stamped copy of the Statement to the undersigned in the return envelope.

Very truly yours,

ABEL, BAND, RUSSELL, COLLIER,  
PITCHFORD & GORDON, CHARTERED

*Kenneth D. Doerr*  
Kenneth D. Doerr  
For The Firm

BK

02 AUG 21 AM 10:35  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

KDD:jmm  
Enclosures

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. J & P Corcoran Family Partnership, LLLP  
Name of the limited partnership

2. 06/28/2001 3. A01000000858  
Date of filing/registration in Florida Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

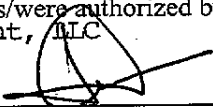
John E. Napolitano  
Name  
100 Wallace Ave., Suite 240  
Address  
Sarasota, FL 34237  
City, State and Zip

FILED  
02 JUN 21 AM 10:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5. The name and address of the new registered agent and/or office:

Kenneth D. Doerr  
Name  
240 S. Pineapple Ave., 10th Floor  
Florida street address (P.O. Box **not** acceptable)  
Sarasota FL 34236  
City, State and Zip

6. Such change(s) was/were authorized by the general partners.  
Family Management, LLC

Signature of General Partner  By: Joseph C. Corcoran,  
Managing Member

*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 obligations 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 limited partnership has been notified in writing of this change.*

  
Signature of Registered Agent Kenneth D. Doerr

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
Filing Fee: \$35.00**