

N95000000527

Requestor's Name

000002985670--5
-09/13/99--01137--009
*****35.00 *****35.00



Office Use Only

COR

IDENTIFICATION NUMBER(S), (if known):

252 Saxony Court
Winter Springs, Florida 32708

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

FILED
 99 SEP 13 PM 2:32
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

*N95000000527
RACH
9-13-99
JY*

Examiner's Initials

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 FLORIDA 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 is: THE AMERICAN CHRISTIAN CHILDREN'S FOUNDATION INC

2. The mailing address of the corporation is: 252 MAIN ST, MARSHALL, IND 47859

3. Date of incorporation/qualification: 1-31-1995 Document number: N9500000527

4. The name and address of the current registered agent and office:
252 SAXONY CT, WINTER SPRINGS
FL 32708

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
DORZEN E. IVEY
252 SAXONY CT
WINTER SPRINGS FL 32708

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 authorized by the board.

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

Sept 7-99
(Date)

Pres - JULIE ODOM
(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.

Dorzen E. Ivey
(Signature of Registered Agent)

Sept 7-99
(Date)

If signing on behalf of an entity:
DORZEN E. IVEY AGENT.
(Typed or Printed Name) (Capacity)

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

99 SEP 13 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED