

P00000111385

Law Offices of  
STEPHEN P. SAPIENZA  
300 N. State Street  
P. O. Box 635  
Bunnell, Fl. 32110  
(904) 437-1814

November 14, 2001

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

400004686784--8  
-11/19/01--01021--004  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Re: Vila At Gallery of the Arts, Inc.

Gentlemen:

Enclosed please find a Statement of Change of Registered Office And Registered Agent form together with a check in the sum of \$35.00.

Please send proof of this change to this office at your earliest convenience.

Very truly yours,

*Kathy*  
Kathy, Secretary to  
STEPHEN P. SAPIENZA

ks  
Enclosures

FILED  
01 NOV 19 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*R.A. change*

T BROWN NOV 27 2001

Charter No. 00000111385

Date Filed 12/4/00

## STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

1. The name of the corporation is: VILA AT GALLERY OF THE ARTS, INC.

2. The name and address of its present registered agent is:

Corporation Service Company  
1201 Hays Street  
Tallahassee, Fl. 32301

3. The name and street address to which its registered agent is to be changed is:  
(P.O. BOX NOT ACCEPTABLE)

Kelly E Scofield 1221 N Hq. Park Ave  
Daytona Bch Fl 32118

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

5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

Kelly E. Scofield

(Typed or printed name and title)

Signature

[Signature]  
President

~~Vice President~~

Date

10-30-01

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 UNDER SECTION 607.0505, FLORIDA STATUTES.

Please Print/Type Name

Kelly E Scofield

Signature

[Signature]  
(Agent)

Date

10-30-01