

PO1000089073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

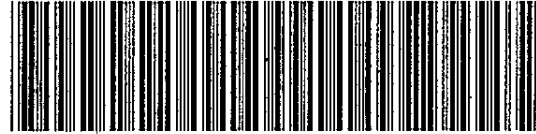
(Business Entity Name)

(Document Number)

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CARLA DELOACH BRYANT
ATTORNEYS & COUNSEIORS AT LAW

July 25, 2004

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

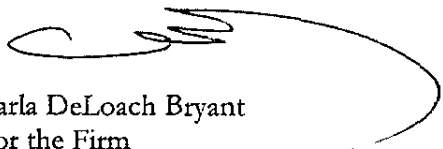
Dear Sir or Madam:

I am writing in regards to MCCRANIE MARINE SERVICES, INC., which has Sunbiz document number P01000089073. Please find enclosed a Statement of Change of Registered Office and the filing fee in the amount of thirty-five dollars (\$35.00). Please return all correspondence regarding this matter to the Law Offices of Carla DeLoach Bryant, P.A., 1206 East Ridgewood Avenue, Orlando, Florida 32803. If you have any questions, please call (407) 740-5005 and ask to speak with Thomas.

Thank you for your prompt attention to this matter.

I remain

Very truly yours,


Carla DeLoach Bryant
For the Firm

CDB/tk

**STATEMENT OF CHANGE OF REGISTERED OFFICE
AND REGISTERED AGENT FOR CORPORATION**

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 and registered agent in the State of Florida.

The name of the corporation: MCCRANIE MARINE SERVICES, INC.

The principal office address: 767 Horseman Drive, Port Orange, FL 32127

The mailing address: 767 Horseman Drive, Port Orange, FL 32127

Date of incorporation/qualification: September 6, 2001

Document number: P01000089073

The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Carla DeLoach Bryant, P.A.
1201 South Orlando Avenue, Suite 350
Winter Park, FL 32789

The name and street address of the new registered agent and office:

Leon G. McCranie
767 Horseman Drive
Port Orange, FL 32127

Such change was authorized by an officer so authorized by the board.

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04 AUG 10 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Signature of Officer or Director

LEON G. MCCRANIE/PRES.
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. Additionally, I hereby confirm that the corporation has been notified in writing of the change in the registered office address.



Signature of Leon G. McCranie, Registered Agent