

PO4000127217

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H12000087677 3)))



H120000876773ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : PARANET CORPORATION SERVICES, INC.
Account Number : I20090000069
Phone : (800) 277-9977
Fax Number : (800) 815-0477

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

REGISTERED AGENT CHANGE
RCP HOME PROGRAM, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RAC Change

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED

12 APR -4 AM 8:05

CLERK OF COURT
TALLAHASSEE, FLORIDA

12 APR -4 PM 3:12

FILED

4/4/12

Dc

(H12000087677 3)

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, 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 or registered agent, or both, in the State of Florida.

1. The name of the corporation: RCP Home Program, Inc.
2. The principal office address: 320 Seven Springs Way, Suite 220, Brentwood, TN 37027
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/08/2004 Document number: P04000127217
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Bryan Bauman11820 N.W. 37th StreetCoral Springs, FL 33065

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.515 East Park AvenueP.O. Box NOT acceptableTallahassee, FL 32301

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, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

Douglas B. Chappell, Vice President
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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

NRAI Services, Inc.

by: Gwendolyn Andrews
Signature of Registered Agent

3/7/12
Date

If signing on behalf of an entity:

Gwendolyn Andrews, Spl. Asst. Sec.

Typed or Printed Name

(H12000087677 3)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

FILED
12 APR -4 PM 3:12