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Division of Corporations
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REGISTERED AGENT CHANGE

FORRESTER-SMITH, INC.

Certificate of Status	0
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**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: Forrester-Smith, Inc.
2. The principal office address: 213 Hobbs Street, Tampa, FL 33619
3. The mailing address (if different): P.O. Box 2546, Brandon, FL 34608 P.O. Box 1609
Lewiston, ME 04241-1609
4. Date of incorporation/qualification: 11/26/1997 Document number: P97000100741
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

John W Gardner

128 West Robertson Street

Brandon, FL 33511

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

CT Corporation System

c/o CT Corporation System, 1200 South Pine Island Road

(P.O. Box 140744)

Plantation, Florida 33324

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 officer or director)

Robert J. Blaisdell
(Printed name of officer or director)

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 relating 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.

By [Signature]
C.T. Corporation System

(Signature of Registered Agent)

9-11-06
(Date)

If signing on behalf of an entity:

SALVINA ARMENTA-GRAY

SPECIAL ASSISTANT SECRETARY

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR26043 (1/05)

FORM 6004000-CT Version 04/04