FILED an 06, 2006 08:00 AM Secretary of State

DOCUMENT # P98000	0025408			
J. MICHAEL MATTHEWS, P.A.				
Principal Place of Business	Mailing Address			
112 WEST CITRUS STREET ALTAMONTE SPRINGS, FL 32714	112 WEST CITRUS STREET ALTAMONTE SPRINGS, FL 32	2714		
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6. Name and Address of the DULIN, RAMSEY		CE	4. FEI Number 59-350193	33 tatus D
6. Name and Address of t		CE	FEI Number	33 tatus D

	TRUS STREET SPRINGS, FL 32714	112 WEST CITRUS STREET ALTAMONTE SPRINGS, FL 327	14				
D	O NOT WRITE	IN THIS SPA	CE		o Chg-P CR2	E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
	6. Name and Address of Current R	egistered Agent	1 September 1991 1991 1991 1991		ta ya kwaka aya ya		
DULIN, RA 201 E PINE SUITE 425 ORLANDO	E STREET				OT WRIT IS SPAC		
	named entity submits this statement for ions of registered agent	the purpose of changing its register	ed office or register	ed agent, or both, in the	he State of Florida. Ta	m familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent an	d tide if applicable (NOTE Registere	d Agent signature required	ure required whon reinstating) DATE			
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution.		.00 May Be ed to Fees			
10. TITLE	OFFICERS AND D	IRECTORS '	- **		the Park Control of the Pa		
NAME STREET ADDRESS GITY-ST-ZIP	MATTHEWS, J M 690 DOMERICK DRIVE MAITLAND, FL 32751				1 Mar 18. 21. 6 3 /56/59	ya. Ngjarang S	
NAME STREET ADDRESS CITY - ST - ZIP			MARIE M'M N. 2 C C PORM, NO S EVEN	en Berry Payripe (1894) (w.s. h.j., y			
NAME STREET ADDRESS CITY-ST-ZIP				DO N	OT WRIT	E	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN TH	IS SPAC	E	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				- , .			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					Prime a dece		
indicated	certify that the information supplied with too this report or supplemental report is to poration or the receiver or trustee empoyer.	rue and accurate and that my signa	ture shall have the	same legal effect as if	made under oath; that	t I am an officer or director	

12 changed, or on an attachment with an address, with all other like empowered.

SIGNATUR	Е	:
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J. Michael Matthews, YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR President