

713103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

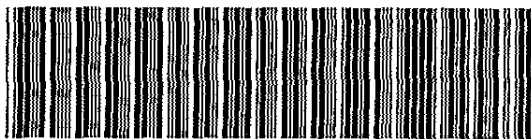
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600024494076

11/12/03--01031--003 **35.00

FILED
03 NOV 12 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BRENNAN, MANNA & DIAMOND

76 South Laura Street ♦ Suite 1700 ♦ Jacksonville, FL 32202 ♦ www.bmdllc.com

Michael R. Freed
Phone: (904) 366-1504
Fax: (904) 366-1505
mrfreed@bmdpl.com

November 10, 2003

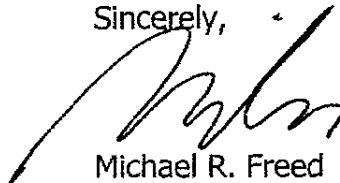
Florida Department of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Edward Waters College, Inc.

Gentlemen:

Enclosed is an executed Statement of Change of Registered Agent for Edward Waters College, Inc. and our \$35 check for the filing fee. Thank you for your attention to this matter.

Sincerely,



Michael R. Freed

MRF:dmm
Enclosures

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Edward Waters College, Inc.

(Name of corporation)

DOCUMENT NUMBER: 713103

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael R. Freed

(Name of person)

Brennan, Manna & Diamond

(Name of firm/company)

76 South Laura Street, Suite 1700

(Address)

Jacksonville, Florida 32202

(City/state and zip code)

For further information concerning this matter, please call:

Michael R. Freed

(Name of person)

at (904) 366-1504

(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**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: Edward Waters College, Inc.
2. The principal office address: 1658 Kings Road
Jacksonville, Florida 32209
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 07/24/1967 Document number: 713103
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Smith, Hulsey, Busy, P.A.

2225 Water Street, Suite 1800

Jacksonville, Florida 32202

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

Brennan, Manna & Diamond, P.L.

76 South Laura Street, Suite 1700

(P.O. Box or personal mailbox NOT acceptable)

Jacksonville, Florida 32202

FILED
03 NOV 12 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

X Dan Anekwa
(Signature of an officer or director)

DAN ANEKWA, 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.

[Signature]
(Signature of Registered Agent)

10/22/03
(Date)

If signing on behalf of an entity:

Michael R. Freed

(Typed or Printed Name)

Managing Partner

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314