I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. SIGNATURE: WILLIAM F. DEMARSH D 03/26/2014

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N07000009434 Entity Name: INTERCHANGE COMMERCIAL CENTER PROPERTY

Current Principal Place of Business:

939 HOLLYWOOD BLVD. DELTONA, FL 32725

ASSOCIATION, INC.

Current Mailing Address:

POST OFFICE BOX 2076 DELAND, FL 32721 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

BOOKER, KIM C 1019 TOWN CENTER DRIVE SUITE 201 ORANGE CITY, FL 32763 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Officer/Director Detail :

City-State-Zip: DELAND FL 32721

Title	D	Title	D
Name	DEMARSH, WILLIAM F	Name	LAWRENCE, EDITH P
Address	POST OFFICE BOX 2076	Address	POST OFFICE BOX 2076
City-State-Zip:	DELAND FL 32721	City-State-Zip:	DELAND FL 32721
Title	D		
Name	DEMARSH, CLINT		
Address	POST OFFICE BOX 2076		

Mar 26, 2014 Secretary of State CC2261657544

FILED

Certificate of Status Desired: No

Date

Date