

705,626

Requester's Name

William D. Clark

Attorney and Counselor at Law

P.O. Box 206
Venice, FL 34284-0206

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)

100003255731--5
-05/17/00--01054--002
*****35.00 *****35.00

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

- Walk in
- Pick up time _____
- Mail out
- Will wait
- Photocopy
- Certified Copy
- Certificate of Status

FILED
00 MAY 17 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

*RAIRO
change
space*

Examiner's Initials *5/30/00*

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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Aloha Kai Association, Inc.

2. The mailing address of the corporation is: 6020 Midnight Pass Rd
Sarasota, FL 34242

3. Date of incorporation/qualification: 5/20/1963 Document number: 705626

4. The name and address of the current registered agent and office:
SCHEFFERT, CHRISTINE F
888 BLVD. OF ARTS #1002
SARASOTA, FL 34236

FILED
00 MAY 17 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
CLARK, William D.
479 Albee Farm Rd
Venice, FL 34292-1203

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.

[Signature]
(Signature of an officer, chairman or vice chairman of the board)

May 4/2000
(Date)

D. A. SHIPPEE, PRES.
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

[Signature]
(Signature of Registered Agent)
William D. Clark
(Date)
May 13, 2000

If signing on behalf of an entity:

(Typed or Printed Name) (Capacity)

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