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R.A. Change

## **COVER LETTER**

TO:	Amendment Section Division of Corporations						
SUBJI	ECT: Florida Attractions Associati	on, Inc. orporation)					
DOCU	MENT NUMBER: 717899						
The en	closed Statement of Change of Registered Offic	e/Agent and fee are submitted for filing.					
Please	return all correspondence concerning this matter	to the following:					
	William G. Lupfer (Name of Co	ntact Person)					
	Florida Attractions Association, Inc. (Firm/Company)						
	1114 N Gadsden St. (Add	ress)					
	Tallahassee FL (City/State ar	32303					
For fur	ther information concerning this matter, please of						
	m G. Lupfer (Name of Contact Person)	_ at ( 850 ) 222-2885 (Area Code & Daytime Telephone Number)					
Enclose	ed is a \$35.00 check made payable to the Depart	ment of State.					
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nnge is submitted for	a corporation orga	02, 607.1508, or 617.150 nized under the laws of the ered agent, or both, in th	ne State of F	lorida	
1. The name of	the corporation: Flor	ida Attractions A	ssociation, Inc.	· · · · · · · · · · · · · · · · · · ·	·	
2. The principal	office address: 1114	N Gadsden St.	, Tallahassee FL 32	303		
3. The mailing a	address (if different):					
4. Date of incorp	poration/qualification	1-15-197	Document number	r: <u>717899</u>		
	d street address of the rtment of State:	current registered a	igent and registered offic	e on file with	the	
	Donna H. Ros	s				
	1114 N Gads	den St.			20010 TALL	-17
	Tallahassee I	FL		32303	器器 2	FI
6. The name and (if changed):	i street address of the	new registered age	nt (if changed) and /or re	gistered office	2007 DEC 26 AM 9: 44 SECRETARY OF STATE TALLAHASSEE, FLORID	T
	William G. Lu	pfer		<del> </del>	器节	
	1114 N Gads	den St. P.O. Box NOT acceptable	))		P	
	Tallahassee	FL .		32303	}	
The street address changed will	ess of its registered of be identical.	ffice and the street	address of the business	office of its	registered agent,	
Such change wa	as authorized by resone board, of the corp	olution duly adopte oration has been no	d by its board of directo otified in writing of the	ors or by an o change.	fficer so	
Stude (Signati	U YEW are of an officer or director)		Steve Geis, Chairr	man of Boal		
I hereby accept I further agree to of my duties, and document is bei corporation has	the appointment as to comply with the p d I am familiar with ng filed merely to re s been notified in wr	registered agent ar ovisions of all stat and accept the ob fleot a change in th ting of this change	nd agree to act in this ca lutes relative to the prop ligation of my position a le registered office addr	npacity per and comp as registered ( ess, I hereby	lete performance agent. Or, if this confirm that the	
Wille	gnature of Registered Agent		4/5	107		
	half of an entity:	•	<i>&gt;</i> (1	vaic)		
William G. L	•					
	(yped or Printed Name)	<u></u>				
		* * * FILING FI	EE: \$35.00 * * *			

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)