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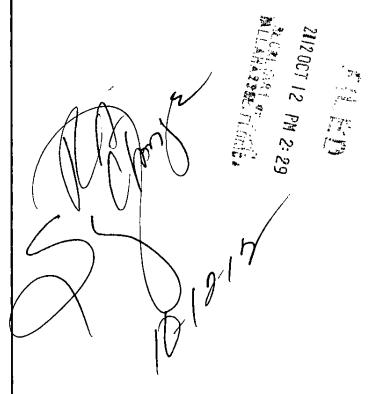
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provision 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

SHOREHOM BY THE SEA, INC.

2. The principal office address:

5301 S. Atlantic Avenue

New Smyrna Beach, FL 32169-4505

3. The mailing address (if different):

4. Date of incorporation/qualification: 06/14/78

Document number: 743093

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Katzman Garfinkel & Berger 300 N. Maitland Avenue Maitland, FL 32751

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

South Milhausen, P.A.

Attn: Marlene L. Kirtland, Esq. 1000 Legion Place, Suite 1200

Orlando, FL 32801

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.

Signature of an officer or director

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 of Registered Agent

If signing on behalf of an entity:

Typed or Printed Name

* * FILING FEE: \$35.00 * * *