

**FILED**  
**Apr 14, 2008 8:00 am**  
**Secretary of State**

40001112

[illegible]

04022008 Chg-NP CR2E037 (12/06)

4. FEI Number <b>59-1996984</b>	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent \_\_\_\_\_  
**MANAGEMENT SERVICES**  
 (0. Box Number is Not Acceptable)  
**MC GREGOR BLVD**  
**6**  
**MYERS** **FL** Zip Code **33919**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Grace Murray, CAM G-RACE J MURRAY, CAM 4-10-08  
(Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	<b>Make check payable to</b> <b>Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD SUNDAY, WILLIAM 6300 S POINTE BLVD 235 FORT MYERS, FL 33919 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6300 SOUTH POINTE BLVD #235
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD DECKER, GERALDINE 6300 SOUTH POINTE BLVD #450 FORT MYERS, FL 33919 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MURRELL, WILLIAM 6300 S POINTE BLVD 430 FORT MYERS, FL 33919 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input checked="" type="checkbox"/> Delete WILKES, ANNA MARIE 6300 SOUTH POINT BLVD #136 FORT MYERS, FL 33919	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Delete ROBINSON, CLAIR 6300 SOUTH POINT BLVD #333 FORT MYERS, FL 33919	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6300 SOUTH POINTE BLVD #333
TITLE NAME STREET ADDRESS	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition BENEDETTO, JOANN 6300 SOUTH POINTE BLVD #115

statements contained in Chapter 119, Florida Statutes. I further certify that the information  
 "\_\_\_\_\_": \_\_\_\_\_ if made under oath; that I am an officer or director  
 \_\_\_\_\_ Block 10 or Block 11 if