746328

SUMPLISE ARC OF LAKE COUNTY, INC 32340 G. R. 44

Office Use Only

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

1.	(Document #)
(Corporation Name)	(Document #) =05/04/01UT051011 *****35.00 *****35.00
2. (Corporation Name)	(Document #)
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☐ Walk in ☐ Pick up time ☐ ☐ Mail out ☐ Will wait	Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS AMENDMENTS AMENDMENTS AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other Franciscola Particles
CR2E031(7/97)	Examiner's Initials

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

	provisions of sections 607.0502, 61		Florida Statutes,
submits the follo	l corporation organized under the law owing statement in order to change it		agent, or both, in
the State of Flor	rida.		
1. The name of	the corporation: SunriseArc of	: Lake County, Inc.	
	100/0		
2. The mailing a	address of the corporation: 12340 (J.R. 44, Leesburg, FL 34/6	00
3. Date of incom	rporation/qualification:1979	Document number:	
4. The name and	d address of the current registered age	nt and office:	_
	J. Cecil Shumacker III		
	911 North Boulevard W.		ARE TO A
	Leesburg, FL 34748		SSE + F
5. The name an	d address of the new registered agent (P. O. Box Not		ice (if changed)
	John W. Askew		
,	702 Grove Street		<u>:</u>
	Eustis, FL 32726		** ;
The street addragent, as chang	ess of its registered office and the streed, will be identical.	eet address of the business offic	e of its registered
Such change wauthorized by t	as authorized by resolution duly adop he board.	pted by its board of directors or	by an officer so
\searrow	Bourley's	5,	16/01
(Signature	of an officer, chairman or vice chairman of the b	oard) (Da	ie)
JC. Box	ULING BOARD CHAI (Printed or typed name and title)	R	
TT . 1	amed as registered agent and to acce hereby accept the appointment as reg to comply with the provisions of all s f my duties, and I am familiar with a	ent sarvice of process for the abo	ove stated in this capacity. nd complete oosition as
	Signature of Registered Agent)	(Date) 5/3/	01
If signing on beha	The state of the s		
70	HP W. ASKEW (Typed or Printed Name)	(Capacity)	EU
	,		

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