

A0200000/1746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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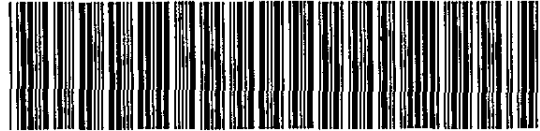
(Business Entity Name)

(Document Number)

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2004 JUL 22 PM 2:50
TALLAHASSEE, FLORIDA
CORPORATIONS

J. BRYAN JUL 23 2004

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Capco Partners, Ltd.

Name of the limited partnership

2. 12/30/02

Date of filing/registration in Florida

3. A02000001746

Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

William H Harrell Jr

Name

2130 SW 78th Terrace

Address

Gainesville FL 32607

City, State and Zip

5. The name and address of the new registered agent and/or office:

William H Harrell Jr

Name

3215 W Knights Ave

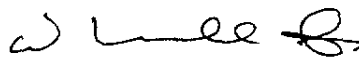
Florida street address (P.O. Box not acceptable)

Tampa

FL 33607

City, State and Zip

6. Such change(s) was/were authorized by the general partners.



Signature of General Partner

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 obligations 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 limited partnership has been notified in writing of this change.



Signature of Registered Agent

**Make checks payable to Florida Department of State and mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00**

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA