A94000001733

Florida Department of State

Division of Corporations
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9 JUL 28 FIN 12: 09

REGISTERED AGENT CHANGE

ROSEWOOD ASSOCIATES, LIMITED

A94000001733

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35,00

SECRETARY OF STATE DIVISION OF CORPORATIONS

99 JUN 28 PM 1: 44

LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH #99000015670

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.

ROSEWOOD ASSOCIATES, LIMITED	
Name of Limited Partner	•
Deta of 612 - In-1-1-1	3. <u>A9400001733</u>
Date of ning/registration in Florida	Document number assigned
The name of the registered agent and the registered office Department of State:	address as shown on the records of the Florid
Mark O. Hackner	
W	
City, State and Zip	-
The name and address of the new registered agent and/or	office:
Michael P. Rice	
Name	——————————————————————————————————————
1745 West Fletcher Avenue	<u>⊆</u> ≅6
Florida Street Address (P.O. Box not	acceptable)
<u>Tampa, FL 33612</u>	
City, State and Zi	ip & CANE
such change(s) was/were authorized by the general partner	ers.
tosewood General, Inc.	ORATIONS
w. Witz	# NS
Mitchell F. Rice, Vice President	-
ignature of General Partner	
	Name of Limited Partner Date of filing/registration in Florida The name of the registered agent and the registered office Department of State: Mark O. Hackner Name 1745 West Fletcher Avenue Address Tampa, FI, 33612 City, State and Zip The name and address of the new registered agent and/or Michael P. Rice Name 1745 West Fletcher Avenue Florida Street Address (P.O. Box not Tampa, FL 33612 City, State and Zin City St

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

Division of Corporations, P. O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00

INHS04(9/97))

Prepared by: John T. Diamandis Florida Bar No. 0797677 Rudnick & Wolfe 101 E. Kennedy Blvd. Suite 2000 Tampa, FL 33602 (813) 299-2111