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LEXIS DOCUMENT SERVICES INC. 801 ADLAI STEVENSON DRIVE SPRINGFIELD, IL. 62703

PHONE: (800) 634-9738 FAX: (800) 217-3225

February 6, 2002

Florida Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: The American Taxpayers Association

To Whom it may Concern:

Enclosed for filing please find the Change of Registered Agent for the above mentioned entity along with our check to cover the applicable filing fees. Please process this filing immediately and return confirmation in the enclosed self-addressed stamped envelope.

Should you experience any problems with the filing of this document, please hold and call our office at (800) 634-9738, ext. 0211. Thank you for your attention to this matter.

Sincerely,

John A. Bounds II Corporate Administrator OZ FEB II AN 8:5

112/13

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

	the provisions of sections				Statutes,
	ned corporation organized ollowing statement in ord				or both, in
the State of F			<i>3</i>	, -	
1. The name of	of the corporation:				
THE AME	RICAN TAXPAYERS ASSO	CIATION, INC.			
2. The mailin	g address of the corporation	on: 10306 Regency	Parkway Drive,	Omaha, NE 6	8114
3. Date of inc	corporation/qualification:	09/18/2000	Document num	ber: <u>F000000</u>	5380
4. The name a	and address of the current	registered agent and	office:		
	C T Corporation Sys	stem	·		
	1200 South Pine Is	land Road			
	Plantation, FL 333	24			,
5. The name a	and address of the new reg	ristered agent (if chan P. O. Box Not Accep		red office (if ch	anged):
	LEXIS Document Ser	vices Inc.		<u> </u>	-
; ī .	3953 W.W. Kelley Ro	oad, Tallahassee,	FL 32311		·: -
agent, as char	dress of its registered offinged, will be identical. was authorized by resolute the board.				_
_Os	and Woo.	els	,	1-24-02	
Signatur	re of an officer hairman or vice	chairman of the board)		(Date)	
Frank J. Ban	rrett, President (Printed or typed name ar	nd ritte)			e- :
corporation, I I further agre	named as registered agen I hereby accept the appoi e to comply with the prov of my duties, and I am far	nt and to accept servi ntment as registered visions of all statutes	agent and agree to	o act in this cap per and comple	pacity.
V If signing on beh	nalf of an entity		- 1,	A	
John A	Sounds II (Typed or Printed Name)		Assistant	-Secreta	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		DIT INIC YES AC-	(Capaci	mo mo	
	* * *	FILING FEE: \$35.	00 * * *	LON STA	
CR2E045(9/00)	DIVISION OF CORPORATIONS	P.O. Box 6327	Tallahassee,]	FL 32314 ST	57.