## FO1000003963

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RA Change T. lews 3/8/04

## McGUIRE, CRADDOCK & STROTHER, P.C.

ATTORNEYS AND COUNSELORS 3550 LINCOLN PLAZA 500 N. AKARD DALLAS, TEXAS 75201

MARY KAY SCHWARTZ (214) 954-6841 mkschwartz@mcguirecraddock.com TELEPHONE (214) 954-6800 TELECOPIER (214) 954-6868

February 25, 2004

Department of State Amendment Section Division of Corporations P O Box 6327 Tallahassee, FL 32314

Re: Filing of Change of Registered Agent/Registered Office for Accelerated Christian

Education, Inc.

Dear Sir or Madam:

Enclosed are two (2) originals of Statement of Change of Registered Office or Registered Agent or Both for Corporations for Accelerated Christian Education, Inc. to be filed with the Florida Department of State's office. I have enclosed a check in the amount of \$35.00 to cover the costs of filing. Please return a filed-stamped copy to me in the enclosed self-addressed stamped envelope.

If you have any questions, please do not hesitate to contact me.

Very truly yours,

Mary Kay Schwartz, Paralegal

mks
H:\SDD\ACE (4010)\FL Dept StateChgRegAgent.wpd
Enclosures

cc: Steven D. Davidson (of the Firm)

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations					
CALL MICH. ACCELERATED CHRISTIAN FOLICAT	TION INC				
SUBJECT: ACCELERATED CHRISTIAN EDUCATION, INC. (Name of corporation)					
DOCUMENT NUMBER: F01000003963					
The enclosed Statement of Change of Registered Of	Flice/A cent and fee are submitted for filing				
Please return all correspondence concerning this ma	tter to the following:				
STEVE	EN D. DAVIDSON				
(Name of person)					
MCGUIRE, CRADDOCK & STROTHER, P.C.					
(Name of firm/company)					
3550 LINCOLN PLAZA, 500 NORTH AKARD					
	(Address)				
DALL	AO TEVAO 75004				
	AS, TEXAS 75201 state and zip code)				
For further information concerning this matter, plea	<u> </u>				
For further information concerning this matter, pica	se can.				
STEVEN D. DAVIDSON	054-6900				
(Name of person)	at ( 214 ) 954-6800  (Area code & daytime telephone number)				
Enclosed is a \$35.00 check made payable to the De	partment of State.				
Mailing Address: Amendment Section	Street Address: Amendment Section				
Amenament Section Division of Corporations	Division of Corporations				
P.O. Box 6327	Division of Corporations 409 E. Gaines Street				
Tallahassee, FL 32314	Tallahassee, FL 32399				

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

en er 👑 🗸

, -	provisions of sections 607.0502, 617.0502, 60			_
	tted for a corporation organized under the law ristered office or registered agent, or both, in		TEXAS	in order
to change its reg	nstered office or registered agent, or both, in	the state of Fioriaa.		
1. The name of t	he corporation: ACCELERATED CHRISTIA	N EDUCATION, INC	<u> </u>	
2. The principal	office address: 8200 BRYAN DAIRY ROAD	, SUITE 200, LARGO	, FLORIDA 33777	
	, <del>.</del>		<u> </u>	
3. The mailing a	ddress (if different):_NOT APPLICABLE			
J		<del></del>	ر ما	
4. Date of incorp	poration/qualification: JULY 24, 2001	Document number:	F01000003963	
	I street address of the current registered agent trnent of State:	and registered office of	on file with the	
	GIBBS LAW FIRM, P.A.		<u> </u>	* :
	5666 SEMINOLE BOULEVARD, SUITE 2			-
	SEMINOLE, FLORIDA 33772		<u></u>	. 0
			72.7	ń
<ol><li>The name and (if changed):</li></ol>	I street address of the new registered agent (if	`changed) and /or regis	stered office	型第三
	ESTHER L. HOWARD	<u> </u>	<del>`</del>	题 20
	8200 BRYAN DAIRY ROAD, SUITE 200		-	
	(P.O. Box or personal mailbo	ox NOT acceptable)		2
	LARGO, FLORIDA 33777		<u> </u>	+-
The street addrechanged will be	ess of its registered office and the street add	ress of the business o	ffice of its registered	l agent, as
Such change w the board, or th	as authorized by resolution duly adopted by e corporation has been potified in writing or	its board of directors f the change.	or by an officer so	authorized by
Esta	Signature of an officer of director)		OWARD, PRESIDER	
I hereby accept I further agree duties, and I an being filed mer been notified in	t the appointment as registered agent and as to comply with the provisions of all statutes in familiar with and accept the obligation of ely to reflect a change in the registered office is writing of this change.	gree to act in this cap relative to the proper my position as regist ce address, I hereby c	acity. r and complete perfo ered agent. Or, if th onfirm that the corp	ormance of my is document is oration has
Esthe	(Signature of Registered Agent)	Feb	21, 200 (Date)	4
If signing on be	chalf of an entity:			
NOT APPLICA	ABLE	NOT APPLICA	BLE	
	(Typed or Printed Name)		(Capacity)	

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