F04000006120

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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RA Chg.



January 19, 2007

FLORIDA SECRETARY OF STATE Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attn: Corporate Filing Dept.

Re: GMH COMMUNITIES SERVICES, INC.

Dear Filing Officer:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations, for the above referenced name, which is to be filed in your office. Also enclosed is check #12306 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions, please contact x153 at 800-345-4647.

Thank you,

MSH

Myra Simmons-Homer Registered Agent Services

Enclosures

PO BOX 1831 AUSTIN, TX 78767

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: GMH COMMUNITIES SERVICES, INC. (Name of Corporation) DOCUMENT NUMBER: F04000006120 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Myra Simmons-Homer (Name of Contact Person) Capitol Corporate Services Registered Agent Department (Firm/Company) 800 Brazos, Suite 1100 (Address) Austin, Texas 78701 (City/State and Zip Code) For further information concerning this matter, please call: Myra Simmons-Homer (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Amendment Section Street Address: Amendment Section **Division of Corporations** Division of Corporations P.O Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of cha	e provisions of sections 607 0502, 617 0502, 607 1508, or 617 1508, Florida Statutes, this nange is submitted for a corporation organized under the laws of the State of Delawate der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	fthe corporation: GMH COMMUNITIES SERVICES, INC.	
2. The principal	al office address: 10 Campus Blvd., Newtown Square, PA 19073	
3. The mailing a	address (if different):	
4. Date of incorp	rporation/qualification: 10/26/2004 Document number: F04000006120	
	nd street address of the current registered agent and registered office on file with the artment of State:	
	Capitol Corporate Services, Inc.	
	1333 North Duval St.	
	Tallahassee, FL 32303	
6. The name and (if changed):	and street address of the new registered agent (if changed) and /or registered office	Commen
		e.A.
	155 Office Plaza Dr., Suite A (PO Box NOT acceptable) Tallahassee, FL 32301	ll System
	Tallahassee, FL 32301)) .
The street addre	lress of its registered office and the street address of the business office of its registered agent, ill be identical.	
Such change wa authorized by th	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change. Anthony J. Cardamone	
Section 18 1 Biggalli	dive or an officer or director) (Proted or typed adme and bile)	
I hereby accept I fivither agree to of my duties, an document is beil corporation has	of the appointment as registered agent and agree to act in this capacity. The to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this eing filed merely to reflect a change in the registered office address, I hereby confirm that the as been notified in writing of this change	
Dela	anie Case 1-19-07	
•	Signature of Registered Agent) (Date)	
If signing on be	pehalf of an entity:	
Delanie Case, Ass	Assistant Secretary on behalf of Capitol Corporate Services, Inc (Typed or Printed Name)	

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