

Dec. 11, 2012 4:05AM
Division of Corporations

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F05000003286

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : PARANET CORPORATION SERVICES, INC.
Account Number : I20090000069
Phone : (800) 277-9977
Fax Number : (800) 815-0477

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: jbrown@collegiatehousing.org

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REGISTERED AGENT CHANGE
COLLEGIATE HOUSING FOUNDATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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TALLAHASSEE, FLORIDA

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T. BROWN

COVER LETTER

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TO: Amendment Section
Division of Corporations

SUBJECT: COLLEGIATE HOUSING FOUNDATION, INC.
Name of Corporation

DOCUMENT NUMBER: F05000003286

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:

Eileen Chaddock
Name of Contact Person

Paranet Corporation Services, Inc.
Firm/Company

3675 Crestwood Pkwy., Suite 350
Address

Duluth, GA 30096
City/State and Zip Code

jbrown@collegiatehousing.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eileen Chaddock at (770) 497-9977
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
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Alabama in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: COLLEGIATE HOUSING FOUNDATION, INC.
2. The principal office address: 409 Johnson Avenue, Fairhope, AL 36532
3. The mailing address (if different): _____

4. Date of incorporation/qualification: June 3, 2005 Document number: F05000003286

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CT Corporation System

1200 South Pine Island Road

Plantation, FL 33324 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.

515 East Park Avenue

P.O. Box NOT acceptable

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Leeman H. Covey
Signature of an officer or director

Leeman H. Covey, President
Printed or typed name and title

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 obligation 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 corporation has been notified in writing of this change.

NRAI Services, Inc.

by: Eileen Chaddock
Signature of Registered Agent

December 11, 2012
Date

If signing on behalf of an entity:

Eileen Chaddock
Typed or Printed Name
Special Asst. Secretary

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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