

NORTH AMERICAN FAMILY INSTITUTE, Inc.

creating diverse and innovative services for people

ADMINISTRATIVE OFFICES:
10 Harbor Street
Danvers, MA 01923
Tel: (978) 774-0774
Fax: (978) 774-8369
1st Floor Fax: (978) 774-2262
TTY: (978) 762-6314
Web Site: <http://nafi.com>

August 20, 2004

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

To Whom It May Concern:

Please find the enclosed Cover Letter and Statement of Change of Registered Agent for Corporations. Also, please find a check in the amount of \$35.00 to process this change. Please feel free to contact me at 978-774-0775 ext. 138 with questions.

Sincerely,

Pamela Bruce
North American Family Institute
Comptroller

Enclosures

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 Massachusetts in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: North American Family Institute, Inc.
2. The principal office address: 10 Harbor Street, Danvers, MA 01923
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 07/27/1993 Document number: F93000003417
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Thomas J. Jarlock
1400 30th Street, Ste. B
Niceville, FL 32578

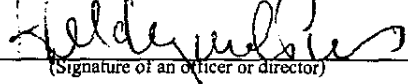
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Yoland Anthony * mailing address
1500 Preservation Path P.O. Box 297
(P.O. Box NOT acceptable)
Baker, FL 32531 Baker FL 32531

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.


(Signature of an officer or director)

Hildegarde Paris, Chief Operating Officer
(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.


(Signature of Registered Agent)

1 Nov 2004
(Date)

If signing on behalf of an entity:

Yoland S. ANTHONY
(Typed or Printed Name)

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

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