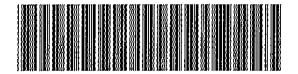
F94372

(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
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TRANSMITTAL LETTER

PO: Amendment Section Division of Corporations	
SUBJECT: WELLBORN PROPERTIES, INC.	
(Name of	corporation)
DOCUMENT NUMBER: F94372	
The enclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Alan R. Jean	
	of person)
JIM JEAN REAL ESTATE	
(Name of fi	rm/company)
P.O. BOX 357880	
(Add	dress)
GAINESVILLE, FL 32635	
(City/state a	and zip code)
For further information concerning this matter, please cal	! :
ALAN R. JEAN (Name of person)	at (352) 372.5326 (Area code & daytime telephone number)
(Paine of person)	(Alea code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Departm	ent of State.
Mailing Address:	Street Address: Amendment Section
Amendment Section Division of Corporations	Division of Cornorations
P.O. Box 6327 Tallahassee, FL 32314	409 E. Gaines Street Tallahassee, FL 32399

CR2E045(09/03)

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes	
	itted for a corporation organized under the laws of the State of FLORIDA gistered office or registered agent, or both, in the State of Florida.	in order
io change us re	gisterea office or registerea agent, or oom, in the state of roomat.	
1. The name of	the corporation: WELLBORN PROPERTIES, INC.	
2. The principal	office address: 4131 NW 28TH LANE, SUITE #1, GAINESVILLE, FL 32606	
3. The mailing	address (if different): P.O. BOX 357880, GAINESVILLE, FL 32635	
		in the second se
4. Date of incom	poration/qualification: 8/12/1982 Document number: F94372	
	d street address of the current registered agent and registered office on file with the artment of State:	
	JIM JEAN	
	412 NE 16TH AVE, SUITE 45	<u>~</u>
	GAINESVILLE, FL 32601	031 SEC
		DEC CRET CAHI
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered office	ARY ARY
	JIM JEAN	2D P H L E. F.C.
	4131 NW 28TH LANE, SUITE 1	L: 0:
	(P.O. Box or personal mailbox NOT acceptable)) · · · · · · · · · · · · · · · · · · ·
	GAINESVILLE, FL 32606	
changed will b		
Such change with board, or the	vas authorized by resolution duly adopted by its board of directors or by an office corporation has been notified in writing of the change.	r so authorized by
	Signature of all chief of director) JIM JEAN, PRESIDENT (Printed or typed name and	fille
I hereby accep I further agree duties, and I a being filed mer	t the appointment as registered agent and agree to act in this capacity. to Comply with the provisions of all statutes relative to the proper and complete me familiax with and accept the obligation of my position as registered agent. Or, rely to reflect a change in the registered office address, I hereby confirm that the mariting of this change. (Signature of Registered Agent)	performance of my
If signing on b	ehalf of an entity:	
·	(Typed or Printed Name) (Capacity)	

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

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