

F97000006224

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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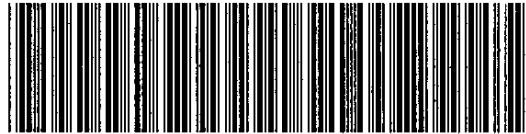
(Business Entity Name)

(Document Number)

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CHARLES BACLET  
AND  
ASSOCIATES, INC.



NATIONAL  
REGISTERED  
AGENTS, INC.

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INTEROFFICE MEMORANDUM

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**TO:** FLORIDA DIVISION OF CORPORATIONS  
**FROM:** TERRY TARWATER, CHARLES BACLET AND ASSOCIATES, INC.  
**SUBJECT:** ATTACHED CHANGE OF AGENT FORMS  
**DATE:** 7/27/2006  
**CC:** FILE

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ATTACHED PLEASE FIND CHANGE OF AGENT FORMS FOR THE FOLLOWING ENTITIES:

ESD PROPERTIES, INC.

JAMES DORAN COMPANY OF FLORIDA

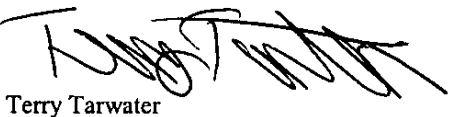
JDC CALHOUN, INC.

Please process as soon as possible and return a filed stamped copy of each filing in the attached self-addressed stamped envelopes. Enclosed please find checks for each filing.

If you have any questions or if I can help you in any way possible, please call.

Very truly yours,

CHARLES BACLET AND ASSOCIATES, INC.



Terry Tarwater

Enclosures

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: ESD Properties, Inc.

(Name of Corporation)

DOCUMENT NUMBER: F97000000244

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:

Cheryl Finch

(Name of Contact Person)

ESD Properties, Inc.

(Firm/Company)

216 Seven Fams Dr., Suite 200

(Address)

Charleston, SC 29492

(City/State and Zip Code)

For further information concerning this matter, please call:

Cheryl Finch

(Name of Contact Person)

at ( 843 ) 881-7550

(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

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

1. The name of the corporation: ESD Properties, Inc.
2. The principal office address: 216 Seven Farms Drive Ste 200  
Charleston, SC 29492
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 01/14/1997 Document number: F97000000224
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System

1200 South Pines Island Road

Plantation, FL. 333324

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

NRAI Services, Inc.

2731 Executive Park Drive, Suite 4

(P.O. Box NOT acceptable)

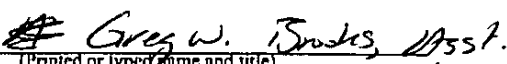
Weston, FL 33331

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

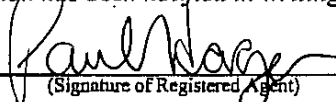
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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)

  
(Printed or typed name and title)  
*Asst. Secretary*

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)

7/25/2006  
(Date)

If signing on behalf of an entity:

Paul J. Hagan, Assistant Secretary  
(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  
CR2E045 (8/05)