## 00000 2608 **CORPORATE** ACCESS, 236 East 6th Avenue . Tallahassee, Florida 32303 INC. P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666 CERTIFIED COPY CUS (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) ݦ (CORPORATE NAME & DOCUMENT #) (CORPORATE NAME & DOCUMENT #) 000005204630---04/08/02--01031--004 \*\*\*\*\*35.00 \*\*\*\*\*35.00 SPECIAL INSTRUCTIONS\_

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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, the undersigned corporation organized under the laws of the State of <u>California</u>
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation : Christopher E. Hobson Inc.
2. The mailing address of the corporation: 3242 E Coast Hwy, Corona Del Mar, CA 92625
3. Date of incorporation/qualification: 5/16/97 Document number: F97000092608
4. The name and address of the current registered agent and office:
David Taylor
1331 E Lafayette St Ste C
Tallahassee, FL 32301
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)
Paracorp Incorporated
236 East 6th Avenue
Tallahassee, FL 32303
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 anthorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
(Signature of an officer, chairman or vice chairman of the board)
Christopher E. Hobson/President  (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
Signature of Registered Agent)  (Signature of Registered Agent)  (Date)
Denise Zollner, Assistant Secretary  If signing on behalf of an entity:  (Date)
Tense Zolher (Typed or Printed Name)  Assistant Secretary
(Capacity) &
* * * FILING FEE: \$35.00 * * *

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