## F9800005456

Pacific Project Management, Inc. 2750 60th Avenue SE Mercer Island, WA 98040

> 300002987543-\_\_5° -09/15/93--01016--005 \*\*\*\*\*35.00 \*\*\*\*\*35.00

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RAIRO

S. PAYNE SEP 1 5 1999

## 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 Florida	-
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 is: Pacific Project Management, Inc.	
1. The name of the corporation is. 17407770	
2. The mailing address of the corporation is: 2750 60 Avenue SE	
Nercer Island, WA 98040	
3. Date of incorporation/qualification: 9/29/98 Document number: F98 0000 5456	
400	
4. The name and address of the current registered agent and office:	
Andrew Avalon	1
404 Nevada Woods Ct.	
Orlando, FL 32824	
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)	
Curtis Stulting	
1949 Shadow Oaks Rd.	
Kissimmee, Fh 34744	
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.	
5- Thines 9/5/99	
(Signature of an officer, chairman or vice chairman of the board) (Date)	-
Fra Thisne President	
Eva Thisne, 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.	
Cut. B. St. A. Sept. 2 (199	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	.,.
(Typed or Printed Name) (Capacity)	
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* * * FILING FEE: \$35.00 * * *	

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