Florida Department of State

Division of Corporations Public Access System

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Account Name : C T CORPORATION SYSTEM

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REGISTERED AGENT CHANGE

THE NICKEL PLATE LINE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RA Chanson
06/30/03

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

Pursuant to th	e provisions of section	ons 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,	
this statement o	of change is submitted	I for a corporation organized under the laws of the State of	
Florida	in order to ch	hange its registered office or registered agent, or both, in the State	
oj Florida.			
1. The name of	f the corporation:	corporation: The Nickel Place Line, Inc.	
2. The principa	il office address:	501 Mandalay Ave.; P.O. Box 3488	
		Clearwater, FL 33767	
3. The mailing	address (if different):_	102 North Westgate Avenue	
		Jacksonville, IL 62650	
4. Date of inco	rporation/qualification	n: 09/03/1982 Document number; F98227	
	ed street address of the artment of State:	e current registered agent and registered office on file with the	
	Michael C	Rausch	
	2165 Gulf	to Bay Blvd. Office Building	
		er Beach, FL 34630	
6. The name a	nd street address of the	the new registered agent (if changed) and for registered office	
changed): CT Corporation System			
		h Pine Island Road	
	· ·	U. Box or personal mulibox NUL 2004phble)	
	Plantation	n, FL 33324	
The street addragent, as chang	ess of its registered of sed will be identical.	ffice and the street address of the business office of its registered	
Such change wanthonized by the	as authorized by resolute he hoard, or the corporation	dution duly adopted by its board of directors or by an officer so cration has been notified in writing of the change.	
X. KULA	mme Davin	L.Dianne Barnett, Secretary	
	the appointment as re to comply with the pro my duties, and I am fi t. Or, if this documen	The board) (Printed or typed to the first complete registered agent and agree to act in this capacity, rovisions of all statutes relative to the proper and complete familiar with and accept the obligation of my position as nt is being filed merely to reflect a change in the registered the corporation has been notified in writing of this change.	
	1 XX	(a)27/n2	
<u>_</u>	ignature/of Registered Agent)	(Date)	
If signing on behal		itine M. Eastwine Stant Secretary	
, c	'yped or Printed Harne'	(Capatity)	
	**	* WITT TRUT TOUT, even on 4 + 4	

* * * FILING FEE: 535.00 * * *

Make Checks payable to Florida Department of State and Mall to: Division of Corporations, P.O. Box 6317, Tallahasee, FL 32314