

F99000005209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

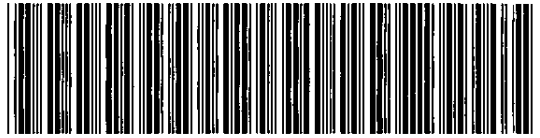
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/31/07--01009--006 **35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts NOV 1 2007

Serving the Legal Community for Over 100 Years . . . Registered Agents in Every State

JAMES A. CURRAN
E-MAIL DIRECT: jim@cgtco.com

JOSEPH J. COLLOPY
E-MAIL DIRECT: joe@cgtco.com

TERESA MAGEE
E-MAIL DIRECT: terry@cgtco.com

Corporation Guarantee and Trust Company

TWO GREENWOOD SQUARE, SUITE 110
3331 STREET ROAD, BENSALEM, PA 19020
TELEPHONES: (800) 563-6131 • (215) 633-8144

FAX (215) 633-8160
E-MAIL: info@cgtco.com

October 24, 2007

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

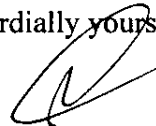
RE: VENTURE PROGRAMS, INC.

Dear Sir or Madam:

Enclosed is duplicate Change of Agent form of the above company for filing with your office.
Also enclosed is our \$35.00 check to cover the filing fee.

Please send your usual acknowledgment and receipt to this office when the filing has been completed.

Cordially yours,



Joseph J. Collopy
Vice-President

JJC/mag

Enclosures

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

1. The name of the corporation: VENTURE PROGRAMS, INC.
2. The principal office address: 1301 WRIGHTS LANE EAST, WEST CHESTER, PA 19380
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/08/1999 Document number: F99000005209
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

W. BRADLEY MUNROE, ESQ.

239 EAST VIRGINIA STREET

TALLAHASSEE, FL 32301

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

EDWIN F. BLANTON

810 THOMASVILLE ROAD


(P.O. Box NOT acceptable)

TALLAHASSEE, FL 32303

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01 OCT 31 AM 10:49
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 officer or director)

PHILIP J. HARVEY, PRESIDENT
(Printed or typed name and title)

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)

10/29/07
(Date)

If signing on behalf of an entity:

(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)