

VAN HOUTEN & PONDER, P.A.  
ATTORNEYS AT LAW

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August 8, 2001

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Re: Cacisa, Inc.  
Change of Registered Office and Registered Agent

Dear Sir or Madam:

Enclosed with this letter are the following items:

1. Original plus one copy of Statement of Change of Registered Office and Registered Agent.
2. Check in the amount of \$35.00.

Thank you for your cooperation in this matter.

Sincerely,



Michael A. Van Houten

/rs  
Enclosures

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\*\*\*\*\*35.00 \*\*\*\*\*35.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Date Filed \_\_\_\_\_

## STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the under-  
signed corporation, organized under the laws of the State of Florida, submits the following statement for  
the purpose of changing its registered office and registered agent in the State of Florida.

1. The name of the corporation is: Cacisa, Inc.

2. The name and address of its present registered agent is:

Michael A. Van Houten  
114 S. Palmetto Avenue  
Daytona Beach, FL 32114

3. The name and street address to which its registered agent is to be changed is:  
(P.O. BOX NOT ACCEPTABLE)

Carroll L. Fisher, III

1210 Riverbreeze Blvd.

Ormond Beach, FL 32176

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

5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of  
the corporation so authorized by the board of directors.

Carroll L. Fisher, III

(Typed or printed name and title)

Signature

(President or Vice President)

Date

08 / 08 / 01

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE  
ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY  
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR-  
THER 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 UNDER SECTION 607.0505, FLORIDA  
STATUTES.

Please Print/Type Name Carroll L. Fisher, III

Signature

(Agent)

Date

08 / 08 / 01

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA