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PURCELL, FLANAGAN & HAY, P.A.

904-355-0820

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Division of Corporations

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Florida Department of State
Division of Corporations
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Change

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To: Division of Corporations
Fax Number : (850)205-0380

From: Account Name : PURCELL, FLANAGAN & HAY, P.A.
Account Number : 07172200522
Phone : (904)355-0355
Fax Number : (904)355-0820

1-2155

REGISTERED AGENT CHANGE

VAN LAN DEVELOPMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

25.00

03 OCT 22 AM 11:51
DIVISION OF CORPORATIONS

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Oct 22 2003 11:43AM PURCELL FLANAGAN & HAY

904-355-9222

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 OR 608.508 ..., Florida Statutes, this statement of change is submitted for a limited liability company organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: VAN LAN DEVELOPMENT, LLC
2. The principal office address: 2334 E STATE ROAD 200, SUITE 300
FERNNADINA BEACH, FL 32034
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 02/25/2000 Document number: L00000002155
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
TODD B. LANIER
3 RED CEDAR ROAD
FERNNADINA BEACH, FL 32034
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JONATHAN L. HAY
1548 LANCASTER TERRACE
(P.O. Box or personal mailbox NOT acceptable)
JACKSONVILLE, FL 32204

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 members or by an officer so authorized by the board, or the company has been notified in writing of the change.

[Signature]
(Signature of officer, chairman or vice chairman of the board)

[Signature]
(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 company has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

10/22/2003
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$25.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

STATE OF FLORIDA
TALLAHASSEE

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