

W04 000003016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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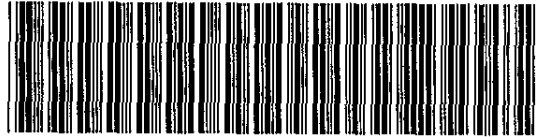
(Business Entity Name)

(Document Number)

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W04-3016
42

LAW OFFICES
BLACKBURN & COMPANY, L.C.
5150 BELFORT ROAD, SOUTH
BUILDING 500
JACKSONVILLE, FLORIDA 32256

DENNIS L. BLACKBURN
SIOBHAN M. WINGFIELD

TELEPHONE: 904-296-7713
FACSIMILE: 904-296-7716
FACSIMILE: 904-493-0384
e-mail: dlb@blackburnco.org

February 17, 2004

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

Dear Sir or Madam:

Enclosed for filing is a Statement of Change of Registered Office or Registered Agent for Capitol Development USA, L.L.C. Also enclosed is a check in the amount of \$25.00 in payment of the filing fee. If you have any questions concerning this filing, please contact me.

Very truly yours,



Dennis L. Blackburn

DLB:rd
Enclosure
c: Mr. James Brady (w/o enclosure)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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, the undersigned limited liability company 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 limited liability company is: CAPITOL DEVELOPMENT USA, L.L.C.

2. The mailing address of the limited liability company is : 11202 ST. JOHNS INDUSTRIAL
PARKWAY, #1, JACKSONVILLE, FL 32246

1/12/04

L04000003016

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

DALE A. BEARDSLEY

Name

4595 LEXINGTON AVE. #100

Address

JACKSONVILLE, FL 32210

City, State and Zip

6. The name and address of the new registered agent and/or office:

LARRY E. WALSHAW

Name

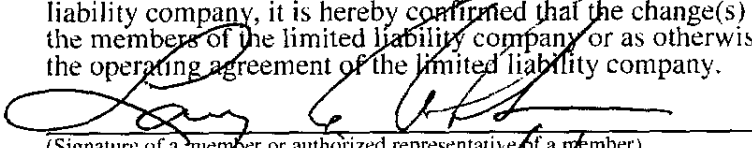
11202 ST. JOHNS INDUSTRIAL PKWY #1

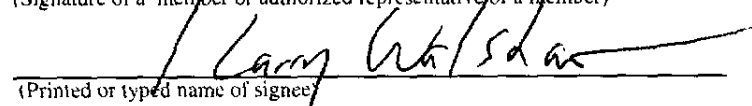
Florida street address (P.O. Box NOT acceptable)

JACKSONVILLE FL 32246

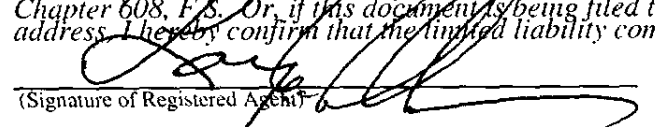
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


(Signature of a member or authorized representative of a member)


(Printed or typed name of signer)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


(Signature of Registered Agent)

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

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