D600001851A

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	∋ #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filina Officer:	
	3	LS
	Office Use On	ly



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2007 JUL 30 PH 12: 54
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Ancoshores, LLC dba Keller Willi (Name of Limited)	iams Success Realty d Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Gene Rivers (Name of Person)		
(Raile of Folson)		
Keller Williams Success Realty (Firm/Company)		
(Time Company)		
P O Box 12964		
(Address)		
Tallahassee, FL 32317		
(City/State and Zip Code)		
For further information concerning this matter, ple	ase call:	
TRUDY Ander Son at (Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following am	ount:	
✓ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

INHS18 (8/05)

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 lim	nited liability company i	s: Ancoshores, L	LC dba Keller Willian	ns Success Realty	
2. The mailing address	s of the limited liability	company is : 88	01 Front Beach Ro	oad, Panama City E	<u>3each, F</u> l
32407					
02/14/06		106000018569			
3. Date of filing/registration in Florida		4	4. Document num	iber	
5. The name of the reg Florida Department	istered agent and the reg of State:	gistered office a	ddress as shown o	on the records of the	he
-	William H. Fitzger				
	00045 45 4	Name			
	8801 Front Beach I				
	Panama City Beach	Address			
		y, State and Zip			
6. The name and addre	ss of the new registered				
	Charles Glenn Bro	wn			
	2004 5 4 5 4 5	Name			
	8801 Front Beach F		OT (11)		
	Florida street addre	ess (P.O. Box N	OT acceptable)		
	Panama City Beach	n FL 32407			
	City,	, State and Zip			
confirmed that after the and the business office liability company, it is	company is not organize e change or changes are to f the registered agent hereby confirmed that the limited liability companient of the limited liabil	made, the Flori will be identica he change(s) wa	da street address of the case	of the registered o of a Florida limite d by an affirmative	office ed e vote
(Signature of a monther or au (Printed or typed name of signature of	phorized representative of a men	nber)			
I hereby accept the ap comply with the provis and I am familiar with Chapter 608 9.5. Or, address, I hereby conf	pointment as registered ions of all statutes relat and accept the obligati iffthis document is bein irn that the limited liabi	l agent and agre ive to the prope ons of my positi g filed to merel lity company ho	e to act in this ca r and complete pe on as registered reflect a change as been notified in	pacity. I further a erformance of my digent as provided in the registered a writing of this ch	igree to duties, for in office lange.
Signature of Registered Age	nt)				
- 5	ision of Corporations,	P.O. Box 6327, NG FEE: \$25.0		32314FE. FI	