## L07194



ACCOUNT NO. : 072100000032

REFERENCE: 799478 4304990

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: April 28, 1998

ORDER TIME : 9:59 AM

ORDER NO. : 799478

CUSTOMER NO: 4304990

CUSTOMER: Ms. Ann Madden

Ropes & Gray

One International Pl

Boston, MA 02110

700002506317--6

## CHANGE OF AGENT

NAME:

ELIGIBILITY MANAGEMENT

SYSTEMS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY 30/98

PLAIN STAMPED COPY 30/98

CONTACT PERSON: Andrew Cumper W.P. Ventyer

W.P. Ventyer

98 APR 30 AN IO 36
DEPARIMENT OF STATE
TALL APPLICATE OF STATE OF

## Florida Department of State, Sandra B. Mortham, Secretary of State

\* \* \* FILING FEE: \$35.00 \* \* \*

## 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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.	
2. The mailing address of the corporation is: 2215 Alicia Ln., Atl	lantic Beach, FL 32233
3. Date of incorporation/qualification: 8/3/89 Docu	ment number: L07194
4. The name and address of the current registered agent and office:	
Charles C. Cain	
2215 Alicia Ln.	98 SE TAL
Atlantic Beach, FL 32233  5. The name and address of the new registered agent and office: (P. C	D. BoxNot Acceptable 2
Corporation Service Company	JOHN SEE, FL
1201 Hays St.	STATE TORRESTA
Tallahassee, FL 32301	
The street address of its registered office and the street address of tagent, as changed, will be identical.  Such change was authorized by resolution duly adopted by its boar authorized by the foard.	the business office of its registered and of directors or by an officer so
The state of the s	
(Signature of an officer, chairman or vice chairman of the board)	3/ 31/98 (Date)
ichard L. Bugley	
(Printed or typed name and title) Having been named as registered agent and to accept service of proporation, I hereby accept the appointment as registered agent a further agree to comply with the provisions of all statutes relative erformance of my duties, and I am familiar with and accept the obegistered agent.	(Date) ocess for the above stated nd agree to act in this capacity. to the proper and complete bligation of my position as
1 + 6 1 - Agen V.2	4/2./99
(Signature of Registered Agent)	(Date)
signing on behalf of an entity:  Timorhy T. O. Brien (Assr. V. ?)	Aser. Vice - Pars.
(Typed or Printed Name)	(Capacity)
' California	( h

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