## M00000000000949

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
(Chyresater Liph Helic hy
" PICK-UP WAIT MAIL
<del></del>
(Duning and Fablic Mann)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
, and the second se
6/14 R/A. Change
$M \sim 100$
111-2249

Office Use Only



300037810823

06/14/04--01076--008 \*\*435.00

Math.

## Pepple Johnson Cantu & Schmidt Pllc

Lawyers

1900 Seattle Tower Building 1218 Third Avenue Seattle, Washington 98101 Phone: (206) 625-1711 Fax: (206) 625-1627 www.pjcs.com

Jeffrey C. Steinert jsteinert@pjcs.com Direct Line: (206) 625-9984 Florida Office 25400 U.S. 19 North, Suite 116 Clearwater, FL 33763 Phone: (727) 724-8585 Fax: (727) 726-9272

> Paris, France Office 15 rue du Puits de l'Ermite 75005 Paris France Phone: (206) 344-2654

June 8, 2004

Florida Department of State Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Statement of Change of Registered Office or Registered Agent

Dear Sir or Madam:

Enclosed for filing please find the Statement of Change of Registered Office or Registered Agent for the following entities:

Pepple Johnson Cantu & Schmidt, PLLC
Coachman Boaters LLC
SP Tim GP, Inc.
Jacksonville Elderly Tower I GP, Inc.
ZP Central Court GP, Inc.
SP Timuquana Limited Partnership
SP Greenwood GP, Inc.
DP Evergreen Manor I, Inc.
Jacksonville Elderly Tower I Limited Partnership
ZP Central Court Limited Partnership
SP Greenwood Limited Partnership
DP Evergreen Manor Limited Partnership, and
GP Tampa, Inc.

June 8, 2004
Page 2

Please do not hesitate to contact me should you have any questions.

ry truly yours,

effrey C. Steinert

## 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	d liability company is:	Pepple Johnson Cantu & S	chmidt, PLLC
2. The mailing address of	the limited liability con	mpany is : 25400 US Highwa	y 19 North, Suite 116
Clearwater, FL 33763	-		
October 26, 2000		M00000002249	
3. Date of filing/registration in Florida		4. Document numb	per
5. The name of the registe Florida Department of S		tered office address as shown or	the records of the
	25400 US Highway	Name 19 North, Suite 152	- Fi
	Clearwater, FL 337	Address '63 State and Zip	
6. The name and address of	of the new registered ag	gent and/or office:	章
	David O. Cantu		<u> </u>
	25400 US Highway	Name 19 North, Suite 116	Ü
	Florida street address	(P.O. Box NOT acceptable)	,
	Clearwater	FL 33763	
	City, S	tate and Zip	
confirmed that after the cl	nange or changes are method the registered agent with the confirmed that the stability company or a fifthe limited liability company.	ander the laws of the State of Fl ade, the Florida street address of Il be identical. Or, in the case of change(s) was/were authorized as otherwise provided in the articompany.	f the registered office
David O. Cantu			
(Printed or typed name of signee)			
	intment as registered a is of all statutes relative d accept the obligation this document is being i that the limited liabili	gent and agree to act in this cap e to the proper and complete pe s of my position as registered a filed to merely reflect a change ty company has been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change.
(Signature of Registered Agent)	<u>~</u>	<del></del>	-

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

INHS18(10/99) FILING FEE: \$25.00