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TO: Amendment Section Division of Corporations		
SUBJECT: MCCAN Communitie	es, Inc. Name of Corporation)	
DOCUMENT NUMBER: NO2000009	190	
	stered Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning	; this matter to the following:	
Kevin Cregan	Jame of Contact Person)	
MCCAN Communities, Inc. (Firm/Company)		
Headway Park Offices 4780 N. State Road 7, Bldg. E (Address)		
Lauderdale Lakes, I	FL 33319 City/State and Zip Code)	
For further information concerning this mat	ter, please call:	
Kevin Cregan (Name of Contact Person)	at (954) 739-1114 x2325 (Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to	the Department of State.	
Mailing Address: Amendment Section Division of Corporate P.O. Box 6327 Tallahassee, FL 3	Division of Corporations Clifton Building	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)