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To:

Division of Corporations

Fax Number

: (850)205-0380

Account Name

: AKERMAN SENTERFITT & EIDSON

Account Number: 076656002425

Phone Fax Number : (407) 423-4000

: (407)843-6610

REGISTERED AGENT CHANGE

ISLEWORTH COMMUNITY TRUST, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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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, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
I. The name of the corporation: ISLEWORTH COMMUNITY TRUST, INC.
2. The principal office address: 9350 CONROY-WINDERMERE ROAD, WINDERMERE, FL 34786
3. The mailing address (if different):
l. Date of incorporation/qualification: 7/20/2005 Document number: N05000007429
i. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
G&L AGENT SERVICES, INC.
390 NORTH ORANGE AVE., SUITE 600
ORLANDO, FL 32801
i. The name and street address of the new registered agent (if changed) and /or registered office (if changed);
AMERICAN INFORMATION SERVICES, INC.
420 SOUTH ORANGE AVENUE, SUITE 1200
(P.O. Box NOT acceptable) Orlando, FL 32801-4904
he street address of its registered office and the street address of the business office of its registered agent, schanged will be identical.
such change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change.
Jefferson R. Voss, President (Vinited or typed name and tritle)
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete performance if my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this ocument is being filed merely to reflect a change in the registered office address, I hereby confirm that the orporation has been notified in writing of this change.
Rebecca S. Watz April 6, 2007
(Signature of Registered Agent) (Date) f signing on behalf of an entity:
Rebecca S. Matz, Asst. Secretary
(Typed or Printed Name)

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

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