N13061

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ACCOUNT NO. : 072100000032 REFERENCE: 180315 7383724 AUTHORIZATION COST LIMIT ORDER DATE: July 25, 2003 ORDER TIME : 10:03 AM ORDER NO. : 180315-085 CUSTOMER NO: 7383724 CUSTOMER: Ms. Patsy Phillips Inroads, Inc. Suite 700 10 South Broadway St. Louis, MO 63102 CHANGE OF AGENT NAME: INROADS/JACKSONVILLE, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX ____ PLAIN STAMPED COPY

CONTACT PERSON: Norma Parramore- EXT# 1147

EXAMINER: _____

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

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	e State
of Florida.	
1. The name of the corporation: INROADS/JACKSONVILLE, INC.	3
2. The principal office address:	- TI
815 S. Main Street, Suite 101, Jacksonville, FL 32207	SE
3. The mailing address (if different):	7 m
10 S. Broadway, Ste. 700, St. Louis, MO 63102	
4. Date of incorporation/qualification: 01/20/1986 Document number: N13061	21
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	•
C T Corporation System	
1200 South Pine Island Road	M. Bo
Plantation, FL 33324	
6. The name and street address of the new registered agent (if changed) and /or registered of changed):	fice (if
Corporation Service Company	
1201 Hays Street (P.O. Box or personal mailbox NOT acceptable)	٠- ~-,
Tallahassee, FL 32301	*
The street address of its registered office and the street address of the business office of its registagent, as changed will be identical.	stered
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change.	r so
Signature of an officer, chairman or vice chairman of the board) Theophilos Coulis, CFO (Printed or typed name and title)	_
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change	,
(Signature of Registered Agent) (Date)	_
If signing on behalf of an entity:	
Elva M. Shipkowski (Typed or Printed Name) Asst. Vice President (Capacity)	

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