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COYER LETTER

TO: Amendme Division of	ent Section of Corporations	* :			
SUBJECT:	Jones High School Histor (Name of Co	rical Society, Inc.			
DOCUMENT NUMBER: N97000001453					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all c	orrespondence concerning this matter t	to the following:			
Benjamin T. Shuman, Attorney at Law					
(Name of Contact Person)					
	N/A				
	(Firm/Con	npany)			
4445 Edgewater Drive					
•	(Addre	ess)			
	Orlando, FL 32804	,			
(City/State and Zip Code)					
For further inform	ation concerning this matter, please ca	ii:			
Benjamin (N	F. Shuman ame of Contact Person)	at (407) 295-4701 (Area Code & Daytime Telephone Number)			
Enclosed is a \$35.	00 check made payable to the Departn	nent of State.			
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

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

statement of change	is submitted for a corporation	7.0302, 607.1308, or 617.1308, Ftc organized under the laws of the Sta registered agent, or both, in the Stat	te ofFlorida
1. The name of the c	orporation; Jones High	School Historical Socie	ety, Inc.
2. The principal office	•	1 Boulevard, Orlando, FI.	
3. The mailing addre	ess (if different):		
4. Date of incorporat	tion/qualification: March 1	0, 1997 Document number: N	97000001453
5. The name and stre Florida Departmen		ered agent and registered office on f	ile with the
_	Leroy Argrett		v
	1874 Gammon Lane		
	Orlando, FL 32805	<u> </u>	
6. The name and stre (if changed):	eet address of the new registered	d agent (if changed) and /or register	a officer Ju
	James W. Wilson	·—	HASH Z
·	809 Wooden Boulev		SEC P
	Orlando, FL 32805		F STA
The street address of as changed will be in	f its registered office and the s dentical.	street address of the business offic	e of its registered agent,
Such change was au authorized by the bo	othorized by resolution duly adord, or the corporation has be	dopted by its board of directors or en notified in writing of the chang	by an officer so
aurrey (Signature of	H. Reicherts	AUDREY H	NEICHERTS
I hereby accept the a I further agree to co of my duties, and I a document is being fi corporation has bee	appointment as registered age imply with the provisions of al im familiar with and accept th iled merely to reflect a change in notified in writing of this ch	ent and agree to act in this capacit il statutes relative to the proper an ne obligation of my position as reg n in the registered office address, I ange.	y. id complete performance istered agent. Or, if this hereby confirm that the
James Sindar	e of Registered Agent)	June 29, 200	16
/ If signing on behalf	of an entity:		
James Le	D.Wilson 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)