

PO0000044710

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MICHAEL R. LEAS*

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MARY A. ROBISON***

CLAY B. TOUSEY, JR. **

KRISTA L. WALDRON



PLEASE REPLY TO: JACKSONVILLE OFFICE

www.fishertousey.com

FISHER, TOUSEY, LEAS & BALL
ATTORNEYS AT LAW

September 2, 2004

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

RE: Wimberly & Associates, Inc. – Document #P00000044710

Dear Sir or Madam:

I enclose a Statement of Change of Registered Agent for the above-referenced entity along with a check in the amount of \$35.00 representing the filing fee. Please file the statement accordingly, and return confirmation to me at the Jacksonville address below.

If there are any questions, please contact me.

Sincerely,

A handwritten signature in cursive script that reads "Janis Eldridge".

Janis Eldridge, CLA
Paralegal

Enclosures
73813

* FLORIDA BAR BOARD CERTIFIED TAX LAW

** FLORIDA BAR BOARD CERTIFIED

WILLS, TRUSTS & ESTATES LAW

*** FLORIDA BAR BOARD CERTIFIED REAL ESTATE LAW

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.

1. The name of the corporation: Wimberly & Associates, Inc.
2. The principal office address: P.O. Box 5829
Jacksonville, FL 32247
3. The mailing address (if different): P.O. Box 5829
Jacksonville, FL 32247
4. Date of incorporation/qualification: 5/3/2000 Document number: P00000044710
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

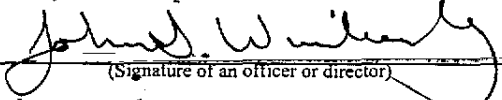
Sam B. Wimberly, Jr.
7246 Placid Oaks Drive
Jacksonville, FL 32277

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

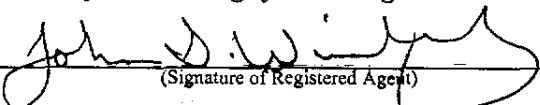
John S. Wimberly
507 Barclay Avenue
(P.O. Box or personal mailbox NOT acceptable)
Atlamonte Springs, FL 32701

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

 John S. Wimberly, President
(Signature of an officer or director) (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.

 4/15/04
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

(Typed or Printed Name) (Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

04 SEP -3 AM 11:11
TALLAHASSEE, FLORIDA
SECRETARY OF STATE