P00000044717

Prop Works, Inc. 116 Hand Street Kissimmee, FL 34741 (City/State/Zip/Phone #)		
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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07/13/05--01030--009 **35.00

05 JUL 13 PH 12: 38
SEGRETARY OF STATE



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

Pursuant to the provisions of sections 6	07.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this		
statement of change is submitted for a c	orporation organized under the laws of the State of		
in order to change its registere	ed office or registered agent, or both, in the State of Florida.		
1. The name of the corporation:	PROP WORKS, INC.		
2. The principal office address:	116 HAND STREET		
	KISSIMMEE, FLORIDA 34741		
3. The mailing address (if different):			
4. Date of incorporation/qualification:	5/3/2000 Document number: <u>P00000044717</u>		
The name and street address of the cu Florida Department of State:	rrent régistered agent and registered office on file with the		
	STEPHEN L. WHITE		
	116 HAND STREET		
	KISSIMMEE, FLORIDA 34741		
The name and street address of the ne (if changed):	ew registered agent (if changed) and /or registered office 7		
-	RAY H. LILES, JR.		
	116 HAND STREET		
(P.C	D. Box NOT acceptable)		
	KISSIMMEE, FLORIDA 34741		
The street address of its registered off as changed will be identical.	ice and the street address of the business office of its registered agent,		
Such change was authorized by resolutanthorized by the board, or the corpor	ation duly adopted by its board of directors or by an officer so ation has been notified in writing of the change.		
/ 1/2/4/8/1//			
(Mentative of an officer of grector)	RAY H LILES IR PRES		
I hereby accept the appointment as re I further agree to comply with the pro of my duties, and I am familiar with a document is being filed merely to refle corporation has been notified by writing	gistered agent and agree to act in this capacity. visions of all statutes relative to the proper and complete performance nd accept the obligation of my position as registered agent. Or, if this ect a change in the registered office address, I hereby confirm that the ng of this change.		
MuHANL	7/5/05		
(Signature of Registrate Agent)	(Date)		
If signing on behalf of an entity:			
RAY H. LILES, JR.			
(Typed or Printed Name)			

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