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FRANK M. GAFFORD

November 13, 2000

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Henderson Newspaper Group, Inc.

400003464964--6  
-11/15/00--01107--001  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Dear Sir or Madam:

Enclosed please find the Henderson Newspaper Group's Statement of Change of Registered Office and Registered Agent for filing. I also enclose our check in the amount of \$35.00 for filing fees.

If you have any questions, please feel free to contact me.

Yours very truly,

*RDA Change  
11-28-00  
ms*

*Suzette Woolsey*

Suzette Woolsey  
Secretary to  
Frank M. Gafford

Enc.

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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FILED

Charter No. P00000098782  
Date Filed: 10/17/00

**STATEMENT OF CHANGE OF REGISTERED OFFICE  
AND REGISTERED AGENT**

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

1. The name of the corporation is: Henderson Newspaper Group, Inc.
2. The name and address of its present registered agent is:  
  
Frank M. Gafford  
228 East Duval Street  
Lake City, Florida 32055
3. The name and street address to which its registered agent is to be changed is:  
  
W. Randy Henderson  
16715 100 Place  
Live Oak, Florida 32060
4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.
5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

Signature

*W. Randy Henderson*  
(President or Vice President)

Date:

*Nov. 17, 2000*

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 UNDER SECTION 607.0505, FLORIDA STATUTES

Name: W. Randy Henderson

Signature:

Date:

*W. Randy Henderson*  
*11/17/00*

**FILED**  
00 NOV 15 PM 12:37  
TALLAHASSEE, FLORIDA  
CLERK OF STATE