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April 18, 2001

600004044216--6 -04/23/01--01114--017 \*\*\*\*\*35.00 \*\*\*\*\*\*35.00

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

Re:

Suncoast Holidays, Inc.

Dear Corporate Examiner:

Enclosed please find a signed Statement of Change of Registered Office and Registered Agent for the above corporation. I have enclosed a check for the filing fee of \$35.00.

If you need any additional information of any kind, please contact me at the above numbers.

Sincerely,

Mariclare Hannah, Esa.

Vice President

OI APR 23 PM 3: 56
SECRETARY OF STATE
TAIL AHASSEE ET CORE

R.A. Charge

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

Pursuant to the provisions of sections 607.0502, 6170502, 607.1508, or 6171508,	
undersigned corporation organized under the laws of the State of <u>Florida</u> submits the following statement in order to change its registered office or registe the State of Florida.	
h: The name of the corporation is: Suncoast Holidays, Inc.	·
2. The mailing address of the corporation is: 6232 Raleigh St. #522, Orlando, FL	32835
3. Date of incorporation/qualification: 4-4-01 Document number: 7010	00035571
4. The name and address of the current registered agent and office:	
Michael Banner	·=- 0
424 W. Tennessee St.	100
Tallahassee, FL 32304  5. The name and address of the new registered agent and office: (P.O. Box Not Ac	eceptable)
William Koch	
6232 Raleigh St. #522	
Orlando, FL 32835  The street address of its registered office and the street address of the business officeaent, as changed, will be identical.	•
Such change was authorized by resolution duly adopted by its board of directors or authorized by the board.	by an officer so
Williams Zud 4-4	1-01
(Signature of an officer, chairman or vice chairman of the board)  WILLIAM Koch - Presiden +	(Date)
(Final or types name and title) Having been named as registered agera and to accept service of process for the above stated corpo the appointment as registered agent and agree to act in this capacity. I further agree to comply wi statutes relative to the proper and complete performance of my duties, and I am familiar with and i my position agregiogoph agent.	th the provisions of all
my position agree to get a section of the section o	1-01
Signature of Registered Agent) (Date)	
If signing on behalf of an entity:  1. 1/1/1/am Koch, President	
(Typed or Printed Name) (Capacity)	<del>W. M. M.</del>
* * * FILING FEE: \$35.00 * * *	
CR2EC4S(7/97) DIVISION OF CORPORATIONS P.O. Box 6327 TALLAHASSEE, FL	
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1967年,1964年中国大学工艺学生的基础。