

P02000018599

Requester's Name

Address

Mosquito Lagoon Outfitters
22 N. Washinton Ave
Titusville, FL 32796

200005503272--4
-05/10/02--01064--015
*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1. _____
(Corporation Name) (Document #)
- 2. _____
(Corporation Name) (Document #)
- 3. _____
(Corporation Name) (Document #)
- 4. _____
(Corporation Name) (Document #)

FILED
 02 MAY 28 PM 12: 09
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

- Walk in
- Pick up time _____
- Certified Copy
- Certificate of Status
- Mail out
- Will wait
- Photocopy

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 16, 2002

MOSQUITO LAGOON OUTFITTERS
22 N. WASHINGTON AVENUE
TITUSVILLE, FL 32796

SUBJECT: MOSQUITO LAGOON OUTFITTERS, INC.
Ref. Number: P02000018599

We have received your document for MOSQUITO LAGOON OUTFITTERS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list only one person as registered agent.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Teresa Brown
Corporate Specialist

Letter Number: 402A00031388

RECEIVED
02 MAY 28 AM 10:59
DIVISION OF CORPORATIONS

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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : MOSQUITO LAGOON OUTFITTERS, Inc.

2. The mailing address of the corporation : 22 N. Washington Ave.
Titusville, FL 32796

3. Date of incorporation/qualification: 2-19-02 Document number: P02,000018599

4. The name and address of the current registered agent and office:
Dorn, Jonathan S.
3875 Indian River Dr.
Cocoa FL 32926

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TALLAHASSEE, FLORIDA

5. The name and address of the new registered agent (if changed) and/or registered office (if changed) (P. O. Box Not Acceptable)
Richard Taylor
3150 North Wickham Rd, Ste 3
Melbourne, FL 32933

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.

Elaine P. Cook (Signature of an officer, chairman or vice chairman of the board) 5-8-02 (Date)

Elaine P. Cook - Sec/Treas.
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

[Signature] (Signature of Registered Agent) 5/7/02 (Date)

If signing on behalf of an entity:

(Typed or Printed Name) (Capacity)

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