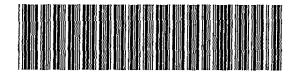
P02000105031

C. L. L. M.
(Requestor's Name)
(Address)
(Address)
· · ·
(City/State/Zip/Phone #)
(City/GlaterZip/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
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SECRETARY OF STATE

RA Change 6/10/05 De

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: CLASSIC REAL ESTATE VENTURES, INC.				
(Name of corporation)				
DOCUMENT NUMBER: P02000105031				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
KEVIN WARDLE				
(Name of contact person)				
CLASSIC REAL ESTATE VENTURES				
(Firm/Company)				
215 CELEBRATION PLACE, SUITE 500				
(Address)				
CELEBRATION, FLORIDA 34744				
(City/state and zip code)				
For further information concerning this matter, please call:				
• · · · · · · · · · · · · · · · · · · ·				
KEVIN WARDLE at (321) 559-1259 (Name of contact person) (Area code & daytime telephone number)				
(Name of contact person) (Area code & daytime telephone number)				
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399				

CR2E045(6/04)

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statinger is submitted for a corporation organized under the laws of the State of ${\sf FLC}$		
	r to change its registered office or registered agent, or both, in the State of Flor		-
1. The name of th	he corporation: CLASSIC REAL ESTATE VENTURES, INC.		
	office address: 215 CELEBRATION PLACE, SUITE 500, CLEBRATION, FLO	ORIDA 3474/	\$
3. The mailing ac	ddress (if different):		
4. Date of incorp	oration/qualification: 9/30/2002 Document number: P02000105	031	
The name and Florida Depart	street address of the current registered agent and registered office on file with timent of State:	he	
_	BRIAN M. MARK		
_	104 N. CHURCH STREET		
_	KISSIMMEE, FLORIDA 34741	05	SIAIG
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	9- NNF 50	DIVISION OF
***	WILLIAM P. GRAY, III, ESQ.	P3	CORP
	390 NORTH ORANGE AVNUE, SUITE 1825	ట్ల	OR/
-	(P.O. Box NOT acceptable)	06	TO
-	ORLANDO, FLORIDA 32801		SS
The street addres as changed will b	ss of its registered office and the street address of the business office of its rebe identical	gistered agen	ıt,
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an off e board, or the corporation has been notified in writing of the change.	icer so	
	KEVIN WARDLE, PRESIDENT		_
-	to a spance or directory, (Printed or typed name and title) the appointment as registered agent and agree to act in this capacity, of comply with the provisions of all statutes relative to the proper and completed a familiar with and accept the obligation of my position as registered as gifted merely to reflect a change in the registered office address, I hereby continued in writing of this change.		ce iis ie
41 1/12	w P. Deer # 6-3-200.		
(Sign	nature of Registered Agept) (Date)		•
lf signing on beh	alf of an entity:		
(Ty	ped or Printed Name)		

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