2008 FOR PROFIT CORPORATION

AMENDED ARMOAL REPORT							FI	1 6 1	
1. Entity Nam					אום	SECRETAR ISION OF	LED RY OF ST CORPOR	TATE ATIONS	
ALAFAYA HOLDINGS, INC.							JUL 22		
Principal Plac	e of Business	Mailing Address			1				
800 NORTH HIGHLAND AVENUE 800 NORTH HIGHLAND AVENUE SUITE 200 SUITE 200) AVENUE						
ORLANDO, F	L 32803 US	ORLANDO, FL 32803 US							
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address				1 11 1 11 11 11 11 11 11 11 11 11 11 11			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			07162008	Chg-P	CR2E034	<u>`</u>	
City & Stat	e	City & State			4. FEI Number 56-2341	338			olied For Applicable
Zip	Country				5. Certificate of Status Desired See Required \$8.75 Additional Fee Required				
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
HOKANSON, DEIDREA				Name Street Address (P.O. Box Number is Not Acceptable)					
800 NORTH HIGHLAND AVENUE SUITE 200 ORLANDO, FL 32803				Silect Address (r. O. Box Natified is Not Acceptable)					
OKLANDO	J, FL 32003		City				FL	Zip Code	
 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent. 								and accept	
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE,									
9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
					ADDITIONO		TOFFOC AND	DIDECTORS	
10.	OFFICERS AND	Defete	11.	Pre		CHANGES TO OFF		Change	Addition
TITLE NAME	KROPP, STEVE PRES	Uerete	NAME	يون افرا		Prof	-	_ •	
STREET ADDRESS				800	N. Highlo	at Aven	ue, Sui	te 201	P
CITY-ST-ZIP	ORLANDO, FL 32803		CITY-ST-ZIP	orl	lands, A	- 32803			
TITLE	VP	☐ Delete	TITLE					☐ Change	☐ Addition
NAME	CARLTON, CHARLES S VP-SEC NAME NAME NAME NAME NAME NAME NAME NAME				i) 117 -	<u> </u>	3394	1968	3
STREET ADDRESS CITY-ST-ZIP	800 N. HIGHLAND AVENUE, SUITE 200 ORLANDO, FL 32803					30013 24/0801			
TITLE NAME	VP PEISNER, ERIC S VP-TRES	Delete	TITLE NAME	WP.	chelle Co	riton - land Ave L 3280	VP Tres	☐ Change	Addition
STREET ADDRESS	800 N. HIGHLAND AVENUE, SUITE 200			800	P.W. Wish	and Ave	emer, 5	F-15 2	ADD
CITY-ST-ZIP	ORLANDO, FL 32803		CITY-ST-ZIP	Or	lanks, b	1 3280	>7		
TITLE	VP MCKINNEY, JOSEPH VP	Delete	TITLE NAME				ı	☐ Change	Addition
NAME STREET ADDRESS	800 N. HIGHLAND AVENUE, SU	ITE 200	STREET ADDRESS	5					
CITY-ST-ZIP	ORLANDO, FL 32803		CITY-ST-ZIP	ļ					
TITLE NAME	VP LAWLER, THOMAS VP	Delete	TITLE NAME					☐ Change	Addilion
STREET ADDRESS	800 N. HIGHLAND AVENUE, SU	ITE 200	STREET ADDRESS	5					
CITY-ST-ZIP	ORLANDO, FL 32803		CITY-\$1-ZIP	_					
TITLE		rea Co. co.	TITLE			1	•	☐ Change	Addition
	VP	Defete			$\overline{}$, ,			
NAME	TUTTLE, MILLS VP		NAME		$\mathcal{D} \cap \mathcal{C}$	122/1		_ •	
	1 ''				37/	22/00	5		
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby indicated of the county indicated indicated on the county indicated in	TUTTLE, MILLS VP 800 N. HIGHLAND AVENUE, SU ORLANDO, FL 32803 certify that the information supplied with d on this report or suppliemental report is rogration or the receiver or trustee emp	ITE 200 this filing does not qualify the and accurate and this report	NAME STREET ADDRESS CITY-ST-ZIP or the exemptions my signature shall t as required by C	contained	same légal effect	as it made under-	oatn. Inal ≀ an	n an oulcer i	or director 1
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby indicated of the county indicated indicated on the county indicated in	TUTTLE, MILLS VP 800 N. HIGHLAND AVENUE, SU ORLANDO, FL 32803 certily that the information supplied with a contins report or supplemental report is reportation or the receiver or trustee emp i, or on an attact may with an address.	ITE 200 this filing does not qualify the and accurate and this report	NAME STREET ADDRESS CITY-ST-ZIP or the exemptions my signature shall t as required by C	contained	same legal ettect 7. Florida Statutes	as it made under-	oatn; that i an ie appears in	n an otticer Block 10 or	Block 11 if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/17/08 407-262-77/7
Date Dayine Proce 5