

PD3000079430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

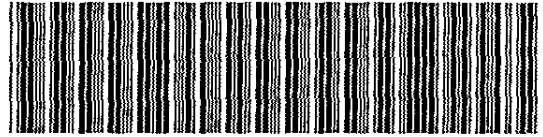
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700035400707

05/05/04--01063--006 \*\*35.00

FILED

04 MAY -5 PM 1:30

TALLAHASSEE, FLORIDA

Rd. Change  
@ 5/12/04

**POHL & SHORT, P.A.\***  
ATTORNEYS AT LAW

DWIGHT I. (IKE) COOL  
ALEXANDER S. DOUGLAS II  
MATT G. FIRESTONE  
GARY A. FORSTER  
MARK A. GRIMES  
RICHARD A. HEINLE  
DAVID J. KOHS  
ROBERT S. MACDONALD  
TERESA N. PHILLIPS  
FRANK L. POHL  
JAMES E. SHEPHERD, V  
HOUSTON E. SHORT  
JOHN R. SIMPSON, JR.  
DANI S. THEOBALD

TELEPHONE (407) 647-7645  
FACSIMILE (407) 647-2314  
EMAIL: PS@POHLSHORT.COM

MAILING ADDRESS:  
POST OFFICE BOX 3208  
WINTER PARK, FLORIDA 32790

COURIER ADDRESS:  
280 WEST CANTON AVENUE, SUITE 410  
WINTER PARK, FLORIDA 32789

May 3, 2004

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

FILED  
04 MAY -5 PM 4:30  
TALLAHASSEE, FLORIDA

Re: New Horizons Realty International, Inc. (the "Corporation")  
Our File No.: 3074-48

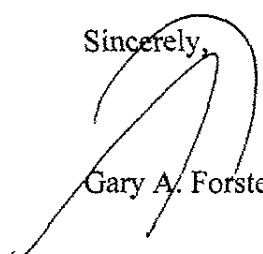
Dear Sir or Madam:

Enclosed is a letter from our client, New Horizons Realty International, Inc., requesting that its principal address and mailing address be changed to 3261 S. John Young Parkway, Kissimmee, Florida 34746.

Also enclosed is a Statement of Change of Registered Office or Registered Agent or Both for Corporations along with our client's check no. 09045 in the amount of \$35.00 to cover the filing fee. Please note that the registered agent is the same. However, the registered office is being changed from 2300 Gunn Road, Kissimmee, FL 34746 to 3261 S. John Young Parkway, Kissimmee, FL 34746.

Please call with any questions your may have.

Sincerely,

  
Gary A. Forster

GAF/aa  
Enclosures  
cc: Terry A. Lacey-Freeman, Sr.

**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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: New Horizons Realty International, Inc.

2. The principal office address: 3261 S. John Young Parkway  
Kissimmee, FL 34746

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 7/18/2003 Document number: P03000079430

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Terence A. Lacey-Freeman, Sr.

2300 Gunn Road

Kissimmee, FL 34746

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Terence A. Lacey-Freeman, Sr.

3261 S. John Young Parkway

(P.O. Box or personal mailbox NOT acceptable)

Kissimmee, FL 34746

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, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

Terence A. Lacey-Freeman/D/VP/T  
(Printed or typed name and title)

*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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

\_\_\_\_\_  
(Signature of Registered Agent)

\_\_\_\_\_  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILED  
04 MAY -5 PM 4:30  
TALLAHASSEE, FLORIDA