2005 FOR PROFIT CORPORATION TO PROFIT OF THE PROFIT OF THE

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Applied for the purpose of business Suite, April 4, edg. Suite	·				FILED	
Purcipant Place of Business 2008 SERCOND AVE	GEORGE DILLARD INCORPORATED					
2. Principal Place of Business	Principal Place of Business Mailing Address				T CONTRACT AND	
2. Principal Place of Business					SECRETAL SEE FLORIDA	
Suits, Apt. #, etc. Suits, Apt. #, etc. City & State Country Zip Country Zip Country Zip Country Zip Country S. Certificate of Status Desired S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent Norma REPORT PLIL ARD 2906 ZND AVE N AT B LAKE WORTH FL 33461 City City FL Zip Code Report Registered agent, or born, in the State of Florida. I am framitive with, and accept the obligations of registered agent, or born, in the State of Florida. I am framitive with, and accept the obligations of registered agent, and born, in the State of Florida. I am framitive with, and accept the obligations of registered agent. RETURN THE ELE STSD.00 After May 1, 2005 Fee Will Ble SSSD.00 Make Check Payable to Florida Department of State DILLARD, GEORGE DILLARD, GEORGE DILLARD, GEORGE DILLARD, GEORGE DILLARD, GEORGE DILLARD, GEORGE DESIR MAN SIRET MORESS DIT-ST-179 Detel RETURN MAN SIRET MORESS DIT-ST-179 Det				1		
City & State City & State City & State City & State Country C	2. Priscipal Place of Business		3. Mailing Address			
Zip Country Zip Country Si. Certificate of Status Desired Size Size Address of Current Registered Agent 7, Name and Address of New Registered Agent 7, Nam	Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E034 _, (10/04)	
S. Certificate of Status Desired Manual Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address 7. N	City & State		City & State		75-2120720	
Name	Žip	Country	Zip	Country		
Second Address (P O. Box Number is Not Acceptable)	6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent	
APT B					s (P.O. Box Number is Not Acceptable)	
City	APT B					
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature	LAKE WORTH FL 33461			City	Zip Code	
SIGNATURE						
NAME	SIGNATURE					
### Add						
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11.	After May 1, 2005 Fee Will Be \$550.00 9. Election Campaign Financing \$5.00 May Be					
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indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: