

P04000064223

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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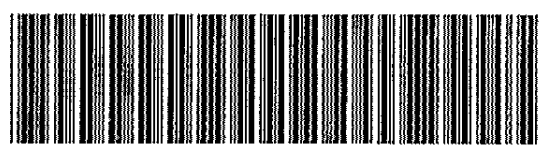
(Business Entity Name)

(Document Number)

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R. A. Change
HJ
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sarasota Real Estate Company
(Name of corporation)

DOCUMENT NUMBER: P04000064223

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:

Hugh C. Ferrell
(Name of contact person)

Law Offices of Hugh C. Ferrell
(Firm/Company)

4924 Hidden Oaks Trail
(Address)

Sarasota, FL 34232
(City/state and zip code)

For further information concerning this matter, please call:

Hugh C. Ferrell at (941) 377-3632
(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 1, 2005

HUGH C. FERRELL
LAW OFFICES OF HUGH C. FERRELL
4924 HIDDEN OAKS TRAIL
SARASOTA, FL 34232

SUBJECT: SHOREWEST REALTY CORPORATION
Ref. Number: P04000064223

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

YOU HAVE LISTED THE INCORRECT CORPORATE NAME ON THE FORM.
THE DOCUMENT NUMBER MUST MATCH THE CORPORATE NAME.

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) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 005A00014182

**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: Sarasota Real Estate Associates, Inc. (formally Shorewest Realty Corp.)
2. The principal office address: 1937 Golf Street, Sarasota, FL 34236
3. The mailing address (if different): _____
4. Date of incorporation/qualification: April 19, 2004 Document number: P04000064223
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Gregory B. Nowak

6525 Superior Avenue

Sarasota, FL 34231

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

Gregory B. Nowak

1937 Golf Street

(P.O. Box NOT acceptable)

Sarasota, FL 34236

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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)

Gregory B. Nowak, Director / President

(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)

March 23 2005
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

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