P05000109762

(Requestor's Name)
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECRETARY OF STATE

R.A. Change

TB 9/5/08

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: PANAMA CITY LAND PART (Name of	NERSHIP G.P., INC.						
(Name of Corporation)							
DOCUMENT NUMBER: P05000109762							
The enclosed Statement of Change of Registered O	ffice/Agent and fee are submitted for filing.						
Please return all correspondence concerning this ma	atter to the following:						
Brian D.	Melton						
(Name of	Contact Person)						
Shackelford, Melton &@McKinley							
(Firm/Company)							
3333 Lee Parkway, 10th Fl.							
(Address)							
Ďallas, TX 75219							
(City/State and Zip Code)							
For further information concerning this matter, pleas	se call:						
Kay Hickman	at (214) 780-1452 (Area Code & Daytime Telephone Number)						
(Name of Contact Person)	(Area Code & Daytime Telephone Number)						
Enclosed is a \$35.00 check made payable to the Dep	partment of State.						
Mailing Address: Amendment Section	Street Address: Amendment Section						
Division of Corporations							
P.O. Box 6327	Clifton Building						
Tallahassee, FL 32314	2661 Executive Center Circle						

Tallahassee, FL 32301

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

statement of cha	inge is submitted for	a corporation orga	02, 607,1308, or 617,i nized under the laws o tered agent, or both, it	f the State of	Florida		
L. The name of t	the corporation:	PANAMA CI	TY LAND PARTNER	RSHIP G.P.,	INC.		
1. The name of the corporation: PANAMA CITY LAND PARTNERSHIP G.P., 2. The principal office address: Panama City, FL 32401							
3. The mailing a	ddress (if different):	PO Box 7	007				
Ü	, ,		TX 75209				
4. Date of incorp	ooration/qualification	n: 8/5/05	Document num	ber: P0500010	09762		
5. The name and			agent and registered of				
	Daren L. S	Shippy, Esq.	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>				
	2548 Blai:	rstone Pines D	r.				
	Tallahasse	e, FL 32301			SEC	2008	
6. The name and (if changed):	street address of the		nt (if changed) and /or		ETARY OF S	2008 SEP -2 PM	
	704-708 W.	. 15th St.			SE	မှု	•
		(PO Box NOT acceptable	}.		DA 3	32	
	Panama Cit	ty, FL 32401		···			
The street address as changed will	ss of its registered of be identical.	office and the street	address of the busine	ess office of its t	registered	l agent,	
Such change was	s authorized by reso e board, or the corp	olution duly adopted oration has been no	d by its board of directified in writing of th	ctors or by an of ie change.	fficer so		
\mathcal{L}			John R. E				
Thereby accept to further agree to if my duties, and locionent is bem	o comply with the p. U am familiar with	registered agent an rovisions of all stat and accept the obl flect a change in th	nd agree to act in this lates relative to the pr ligation of my position of registered office ad	oper and compl n as revistered c	lete perfo went. O	r, 17 lhis	
			8/2	25/08			
(Sign	fature of Registered Vgent)		(Date)			
t signing on beh	nalf of an entity;						
Jimmy Cleve	land						
	ped or Printed Name)	<u> </u>					

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