

P0500014883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

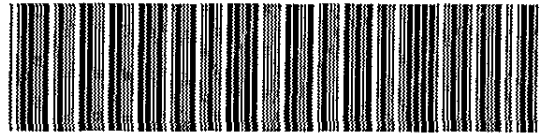
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

**GILLIGAN, KING, GOODING & GIFFORD, P.A.**

PATRICK G. GILLIGAN  
W. JAMES GOODING III  
WILLIAM ALLAN KING  
ERIC P. GIFFORD  
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ATTORNEYS AT LAW  
1531 SOUTHEAST 36TH AVENUE  
OCALA, FLORIDA 34471

TELEPHONE (352) 867-7707  
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November 17, 2006

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

Re: ND Homes, Inc.  
Document Number: LP05000148839

Dear Sir or Madam:

Enclosed please find an application to change the Registered Agent in the above referenced matter along with my trust check for filing fees.

I also request that you please change the principal and mailing address of ND Homes, Inc. to the following:

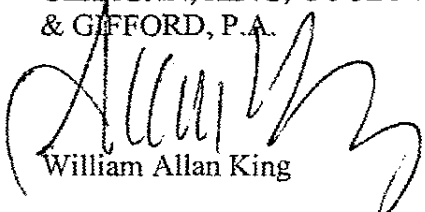
Principal address: 9880 SW 84th Court, Suite A  
Ocala, Florida 34481

Mailing address: 9880 SW 84th Court, Suite A  
Ocala, Florida 34481

Should you have any questions do not hesitate to contact me.

Sincerely,

GILLIGAN, KING, GOODING  
& GIFFORD, P.A.

  
William Allan King

WAK/jd  
Enclosures: Registered Agent change form  
Trust check  
cc: Joseph A Colyer

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ND Homes, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000148839

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:

William Allan King, Esquire  
(Name of Contact Person)

Gilligan, King, Gooding & Gifford, PA  
(Firm/Company)

1531 SE 36th Avenue  
(Address)

Ocala, FL 34471  
(City/State and Zip Code)

For further information concerning this matter, please call:

William Allan King, Esquire at ( 352 ) 867-7707  
(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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: ND Homes, Inc.
2. The principal office address: 10739 Deerwood Park Boulevard, Suite 200A, Jacksonville, FL 32256
3. The mailing address (if different): 16475 SW 30th Terrace Road, Ocala, FL 34473
4. Date of incorporation/qualification: 11/08/2005 Document number: P05000148839
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Douglas R Maxwell

10739 Deerwood Park Boulevard, Suite 200A

Jacksonville, FL 32256

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

William Allan King, Esquire

1531 SE 36th Avenue

(P.O. Box NOT acceptable)

Ocala, FL 34471

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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.

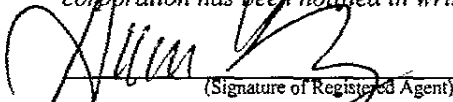
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

Joseph Colyer

(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:

William Allan King, Esquire

(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

CR2E045 (8/05)