## P93000065245

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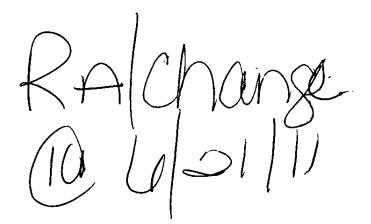


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SECRETARY OF STATE DIVISION OF CORPORATIONS



## **COVER LETTER**

TO: Amendmen Division of	nt Section f Corporations			
SUBJECT:	Hannover Re Real Esta Name of Con	te Holdings, Inc.		
DOCUMENT NU	MBER: P930	00065245		
The enclosed States	ment of Change of Registered Office/	Agent and fee are submitted for filing.		
Please return all co	rrespondence concerning this matter t	o the following:		
		ū		
	Brian W			
•	Name of Cont	act Person		
Hannover Re Real Estate Holdings, Inc. Firm/Company				
	Pilli/Con	ipany		
800 N. Magnolia Ave., Suite 1400				
	Addre			
	Orlando, F	32803		
Orlando, Fl 32803 City/State and Zip Code				
	hwarnar@hlran	porios com		
bwarner@hlramerica.com  E-mail address: (to be used for future annual report notification)				
	•	•		
For further informa	tion concerning this matter, please cal	I		
7 07 111 111 01 111 01 111 0	mon concerning this matter, pieuse eu	••		
	Brian Warner	at ( 407 ) 244-7530 Area Code & Daytime Telephone Number		
Nan	ne of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a \$35.0	0 check made payable to the Departm	ent of State.		
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle		
	1 ananassee, FL 32314	Tallahassee, FL 32301		

TO:



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

June 1, 2011

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**BRIAN WARNER** HANNOVER RE REAL ESTATE HOLDINGS, INC. 800 N. MAGNOLIA AVE., SUITE 1400 ORLANDO, FL 32803

SUBJECT: HANNOVER RE REAL ESTATE HOLDINGS, INC.

Ref. Number: P93000065245

We have received your document for HANNOVER RE REAL ESTATE HOLDINGS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must also contain the address of the registered agent which must be at a Florida street address.

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 Regulatory Specialist II

Letter Number: 011A00013389

I reue,

Please see corrected form. BRIAN WARNER

www.sunbiz.org

-División of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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

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: Hannover Re Real Estate Holdings, Inc.
2. The principal office address: 800 N. Magnolia Ave., Suite 1400, Orlando, FI 32803
3. The mailing address (if different):
4. Date of incorporation/qualification: 09/20/1993 Document number: P93000065245
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Paul S. Glover
800 N. Magnolia Ave., Suite 1400, Orlando, Fl 32803
Resigned Resigned
Resigned  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(if changed):  Brian Warner  PROPERTY  PROPERT
800 N. Magnolia Ave Ste. 1400
Orlando, F/ 32803
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  Brian Warner, Secretary  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  If signing on behalf of an entity:
Signature of an officer or director  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

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

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