## DOWN BREQUESTER'S Name Aug S Day OF Y Bush, Brequester's Name Aug S Day OF Y 1301 Metropoliton TSIVO Address TW. FL 37368 386-7664 City/State/Zip Phone #

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) ■ Walk in Pick up time Certified Copy Mail out Will wait Photocopy Certificate of Status 700003358867--7 -08/16/00--01005--012 \*\*\*\*\*35.00 \*\*\*\*\*35.00 **NEW FILINGS AMENDMENTS** ☐ Profit ☐ Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication ☐ Dissolution/Withdrawal ☐ Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials A

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

the State of Flor	lowing statement in order to change its registered office or registered agent, or both, in order.	-
1. The name of t	the corporation is: E & P Real Estate, Inc.	
2. The mailing a	address of the corporation is: P. O. Box 3117  Lake City, Florida 32056	
3. Date of inco	orporation/qualification: 04/19/94 Document number: P94000029	
	nd address of the current registered agent and office:	-
	The Prentice-Hall Corporation System, Inc.	<u> </u>
•	1201 Hays Street, Suite 105	ŋ
•	Tallahassee, Florida 32301 SS ♂	و
5. The name an	nd address of the new registered agent and office: (P. O. Box Not Acceptable)	
	Eric C. Rost, M.D Southeast Regional Cancer Center Tallahassee, In	nc.
	2003 Centre Pointe Blvd.	
	Tallahassee, Florida 32308	_ ==
- agent as chang	dress of its registered office and the street address of the business office of its registered aged, will be identical.	•
Such change w	was authorized by resolution duly adopted by its board of directors or by an officer so	
suth arizad day	the board.	
authorized by	L/16/02	
/ X	the board.  A / 16/00  The of an officer, chairman or vice chairman of the board)  (Date)	
(Signature	we of an officer, chairman or vice chairman of the board)  C. Rost, M.D.	,
(Signature	ne of an officer, chairman or vice chairman of the board)  C. Rost, M.D.  (Printed or typed name and title)  named as registered agent and to accept service of process for the above stated I hereby accept the appointment as registered agent and agree to act in this capacity.  see to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as	
Having been n corporation, I I further agree performance or registered age	re of an officer, chairman or vice chairman of the board)  C. Rost, M.D.  (Printed or typed name and title)  named as registered agent and to accept service of process for the above stated  I hereby accept the appointment as registered agent and agree to act in this capacity.  ee to comply with the provisions of all statutes relative to the proper and complete  of my duties, and I am familiar with and accept the obligation of my position as  sent.	.• .
Having been n corporation, I I further agree performance or registered age	The of an officer, chairman or vice chairman of the board)  C. Rost, M.D.  (Printed or typed name and title)  named as registered agent and to accept service of process for the above stated  I hereby accept the appointment as registered agent and agree to act in this capacity.  ee to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as  sent.  (Signature of Registered Agent)  (Date)	.• .

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

CR2E045(7/97)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314