

P95000034041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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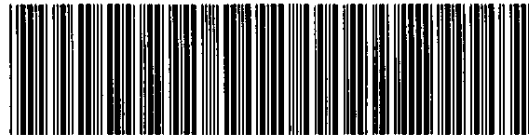
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Charge

C.COULLIETTE

JUL 19 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Airport Commerce Park Associates, Inc.
Name of Corporation

DOCUMENT NUMBER: P95000034041

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:

Sally Larson
Name of Contact Person

Airport Commerce Park Associates, Inc.
Firm/Company

500 Australian Ave. So., Suite 120
Address

West Palm Beach, FL 33401
City/State and Zip Code

sally@rhodesholdings.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sally Larson at (561) 659-5400
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: Airport Commerce Park Associates, Inc.
2. The principal office address: 500 Australian Ave. So., Suite 120
West Palm Beach, Florida 33401
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/1/1995 Document number: P95000034041
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)

Martin A. List

223 Sunset Ave., Suite 110

Palm Beach, Florida 33480

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

Paul Rhodes

500 South Australian Ave. So., Suite 120

P.O. Box NOT acceptable

West Palm Beach, FL 33401

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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]
Signature of an officer or director

Paul Rhodes, 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]
Signature of Registered Agent

7.12.10

Date

If signing on behalf of an entity:

Paul Rhodes
Typed or Printed Name

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