

REFERENCE

155552

5042594

AUTHORIZATION

COST LIMIT

ORDER DATE: October 23, 2001

ORDER TIME : 2:08 PM

ORDER NO. : 155552-030

CUSTOMER NO: 5042594

600004652136--9

CUSTOMER: Ms. Kathy Worthington

Kemmons Wilson, Inc. 1629 Winchester Road

Memphis, TN 38116

CHANGE OF AGENT

VENICE HOTEL CO., INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Mimi Stephens -- EXT#

EXAMINER:

## 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, the undersigned corporation organized under the laws of the State of FLORIDA	
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: VENICE HOTEL CO., INC.	· <u>a</u> ::-
2. The mailing address of the corporation: 1629 WINCHESTER RD P.O. BOX 30185 AMF	
MEMPHIS, TN 38130	
3. Date of incorporation/qualification: 08/02/1995 Document number: P95000059788	
4. The name and address of the current registered agent and office:	
BRIAN LOWER ST. S.	
ORANGE LAKE COUNTRY CLUB - 8505 W. IRLO BRANSON MEMORIAL HWY	
KISSIMMEE, FL 34747	
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  (P. O. Box Not Acceptable)	
Corporation Service Company 5	
1201 Hays Street	
Tallahassee, Florida 32301	
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.	
X / Nalin	
(Signature of an officer, chairman or vice chairman of the board) (Date)	
R.E. WALLIN, Correctary  (Printed or typed name and title)	. <del></del> _
Having been named as registered agent and to accept service of process for the above stated corporation, 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 duities, and I am familiar with and accept the obligation of my position as registered agent.	
(Signature of Registered Agent) (Date)	
(Signature of Registered Agent) (Date)	T.
If signing on behalf of an entity:  Deborah D. Skipper  Asst. Secretary	
(Typed or Printed Name) (Capacity)	-
* * * FILING FEE: \$35.00 * * *	

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