11/07/97 FRI 14:12 FAX 904 359 8700

11/07/97

FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

1:35 PM

(((H97000018594 6)))

DIVISION OF CORPORATIONS TO:

FAX #: (850)922-4000

FROM: FOLEY & LARDNER

072720000061

PETERSON CONTACT: KAREN PHONE: (904)359-2000

FAX #: (904)359-8700

NAME: SCANSYS CORPORATION

AUDIT NUMBER...... H97000018594

DOC TYPE......REGISTERED AGENT CHANGE

CERT. OF STATUS..0

PAGES....

FAX

CERT. COPIES.....0

DEL.METHOD.. \$35.00 EST CHARGE..

NOTE: PLEASE PRINT THIS PAGE AND USE IT AS A COVER SHEET. TYPE THE FAX

AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

ENTER SELECTION AND <CR>: m



Fax Audit No. H97000018594

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Section 607.0502, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

- The name of the corporation is SCANSYS CORPORATION.
- 2. The street address of its present registered office is: 200 W. Forsyth Street, Suite 1600, Jacksonville, FL 32202.
- 3. The street address of its new registered office is: 569 Edgewood Avenue South, Jacksonville, FL 32205
- 4. The name of its present registered agent is Clarence H. Houston, Jr.
- 5. The name of its new registered agent is Sam D. Simpson.
- 6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

7. Such change was authorized by resolution duly adopted by its board of directors.

Dated

., 1997.

SIGNATURE

harles N. Hendrix, President

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND 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 DUTIES AND OBLIGATIONS OF A REGISTERED AGENT.

SIGNATURE:

Prepared by:

Linda Y. Kelso Fla. Bar No. 298662

Foley & Lardner

200 Laura Street, Jacksonville, FL 32202

904/359-2000

Fax Audit No. H97000018594