FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

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11/02/1995	LAKELAND	FL 338U2			LAKI	ELAND FL 3380	02							
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33801 25 POLK 26 30 Points 30 Points No. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address (P.O. Box Namber 10. Name and	Zip		Cour					Countr	у					
CUNDIFF, WOODROW M 2034 YOLTAIRE LAKELAND FL 33801 81 82 Street Address (P.O. Sox Number is Not Acceptable) 83 84 Cuy FL 85 Zo Code 11. Pursuant to the provisions of Sections 697-0502 and Cur 1506, Fonds Statutes, and corporation submits this statement on the purpose of throughing its registered agont, and copyrighted agont or both in the Share of Fonds Surfer Congress authorized by the corporation's submits this statement on the purpose of throughing its registered agont, and copyrighted agont, and accept the obligations of Section 607-0505, Fonds Statutes SIGNATURE 12. OFFICER SAND DRIC CONSTITUTE TO BE	24 3380					30					Florida Statutes Yes	. □ No		3 100.000,
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11. Persuant to the provisions of Sections 607-0502 and 607-1508, borda Statutes by the corporation submits this statement for the curpose of changing its registered office or registered agent, no both, in the State of Reads Size, change was authorised by the corporation's board of directors. I herety accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607-0505, Frenda Statutes SIGNATURE Symbol provisions of Sections 607-0505, Frenda Statutes 1201-1500 1201-								84	#	City			85 Z	Zip Code
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119 07(3/k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the comporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE

Date:

Dat

CR2E034 (12/95)