

P96000020346

R.G. Johnson
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
01 DEC -3 AM 9:49

November 28, 2001

Dear Sir or Madam:

Please find forms and check \$70 enclosed for the change of address and change of agent address for two corporations, Lamara Motel Corp. and Dee Valley Properties Inc.

Thank you

Sincerely



R.G. Johnson

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-12/03/01--01069--003
*****70.00 *****35.00

RA address Chg.

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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 _____ 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 : LAMARA MOTEL CORP.
2. The mailing address of the corporation : ~~520~~ 7150 SUNSET WAY, APT 106E
ST PETE BEACH, FL 33706
3. Date of incorporation/qualification: 5/8/96 Document number: P96 000020346
4. The name and address of the current registered agent and registered office:
GRAHAM JOHNSON
520, 73RD AVENUE
ST PETE BEACH. FL 33706
5. The name and address of the new registered agent (if changed) and /or registered office (if changed):
GRAHAM JOHNSON
7150 SUNSET WAY, APT 106E
ST. PETE BEACH. FL 33706

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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.

Robert Graham Johnson
(Signature of an officer, chairman or vice chairman of the board)

11/28/01
(Date)

ROBERT GRAHAM JOHNSON (VICE PRESIDENT)
(Printed or typed name and title)

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 duties, and I am familiar with and accept the obligation of my position as registered agent.

Robert Graham Johnson
(Signature of Registered Agent)

11/28/01
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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