P96000085513

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RA. Change

C. Coulliste DEC 1 6 2004

CT Corporation System	660 E. Jefferson St., Tallahassee,	FL, 32301 850-222-1092
	 	
Kings Ridge Golf Corporation		
<u> </u>		<u> </u>
		
		
() Profit () Nonprofit	() Amendment	() Merger
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark
() Limited Partnership	() Annual Report	() Other
() LLC,.	() Name Registration () Fictitious Name	Change of RA
() Certified Copy	() Photocopies	() UCC
() Call When Ready	() Call If Problem	() After 4:30
(x) Walk In () Mail Out	() Will Wait	(x) Pick Up
C) Iviair Out		
Name Availability	12/14/2004	Order#: 6244755
Document _	AAM	
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Verifier	•	المراب منتقل المراجع المنافي المراجع المنافي المراجع المنافية
W.P. Verifier		Amount: C

. STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

this statement of change is submitted for a corporation organized under the laws of	· ·
Florida in order to change its registered office or registered agent	· -
of Florida.	SE SE
1. The name of the corporation: Kings Ridge Golf Corporation	CR CR
2. The principal office address: 700 NW 107th Avenue, Suite 400, Miami FL 33172	HASS 5
3. The mailing address (if different): 700 NW 107th Avenue, Suite 400, Miami FL 33172	2
5. The maning actions (in america).	55 E 25
4. Date of incorporation/qualification: 10/16/1996 Document number	P96000085513
5. The name and street address of the current registered agent and registered office Florida Department of State:	on file with the
Benjamin P. Butterfield, Esq.	
700 NW 107th Avenue, Suite 400	i i
Miami, FL 33172	
6. The name and street address of the new registered agent (if changed) and /o changed):	or registered office (if
C T Corporation System	
c/o C T Corporation System	
(P.O. Box or personal mailbox NOT acceptable) 1200 South Pine Island Road, Plantation, Florida 33324	
The street address of its registered office and the street address of the business of agent, as changed will be identical.	ffice of its registered
Such change was authorized by resolution duly adopted by its board of directors authorized by the board, or the corporation has been notified in writing of the ch	or by an officer so ange.
(Signature of an officer, chairman of vice chairman of the board) (Printed or typed name and	anling UF
I hereby accept the appointment as registered agent and agree to act in this cape I further agree to comply with the provisions of all statutes relative to the proper performance of my duties, and I am familiar with and accept the obligation of m registered agent. Or, if this document is being filed merely to reflect a change is office address, I hereby confirm that the corporation has been notified in writing CT Corporation System	r and complete sy position as n the registered
By: Canin Ban	34
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity: CONNIE BRYAN PECIAL ASSISTANT SECRETARY	
(Typed or Printed Name) (Capacity)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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