## P97000001403

William P. Battaglia, P.A.

IOO LINCOLN AVENUE WINTER PARK, FLORIDA 32789

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WINTER PARK, FLORIDA 32790-3010

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June 10, 1999

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re:

Invision Management Services, Inc. / Document Number P97000001403

Statement of Change of Registered Office or Registered Agent for Corporations

Dear Sir/Madam:

Enclosed for filing in your office is a Statement of Change of Registered Office or Registered Agent for Corporations for Invision Management Services, Inc. A check in the amount of \$35.00 to cover your filing fee is enclosed as well.

Thank you for your assistance.

000002903880--9 -06/14/99--01124--002 \*\*\*\*\*\*35.00 \*\*\*\*\*\*35.00

Sincerely.

Barbara J. Shold, Legal Assistant

William P. Battaglia, Esquire

WPB/bjs Enclosures

F:\Clients\inVision\DivCorp.ltr.wpd

RAChg-

V. SHEPARD JUN 1 8 1999

## · STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

the undersign	ned corporation organized t	ınder the laws of the	
submits the f the State of I		to change its register	red office or registered agent, or both, in
•	e of the corporation is:	Invision Management S	Services. Inc.
2. The maili	_	on is: 605 Crescent	Executive Court, Suite 300, Lake Mary,
3. Date of in	ncorporation/qualification: J	anuary 2, 1997 [	Oocument number: <u>P97000001403</u>
4. The name	office:		
	W.P. Battaglia, Esc	, , , , , , , , , , , , , , , , , , , ,	
		k Avenue, Suite 101	
e en	Winter Park, Florid		
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)  W.P. Battaglia, Esquire			
	100 Lincoln Avenue	<del>.</del>	
	Winter Park, Florid	a 32789	
as changed, v	will be identical. e was authorized by resolu		of the business office of its registered agent, its board of directors or by an officer so
1,			
(Signat	ture of an officer, chairman or vice c	hairman of the hoard)	June 9 199
5tever			(But)
	(Printed or typed name and title)	Gent	
corporation, I further agr	I hereby accept the appoint ee to comply with the provis of my duties, and I am fam	ment as registered ag sions of all statutes re	of process for the above stated gent and agree to act in this capacity. lative to the proper and complete the obligation of my position as
W.1	P. B am_		May 17, 1999
	(Signature of Registered Agent)		(Date)
If signing on be	ehalf of an entity:		
	(Typed or Printed Name)		(Capacity)
	* * *	FILING FEE: \$35.0	00 * * *
CR2E045(7/97)	Division of Corporations	P.O. Box 6327	Tallahassee, FL 32314