P97000003553

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SECRETARY OF STATE
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01/10/08

COVER LETTER

Division of Corporations
SUBJECT: Homenet 2000, Inc. (Name of Corporation)
DOCUMENT NUMBER: P9700003553
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Fred C. Strickroot (Name of Contact Person)
Homenet 2000, Inc. (Firm/Company)
(Address) 4421 madison St, Ste 104
New Port Richey, FL 34652 (City/State and Zip Code)
For further information concerning this matter, please call:
Fred C. Strick root at (727) 534-3090 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State

Mailing Address: Amendment Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of chang	wisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this e is submitted for a corporation organized under the laws of the State of Florida ochange its registered office or registered agent, or both, in the State of Florida.
1. The name of the	corporation: Homenet 2000, Inc.
2. The principal of	
	New Port Richey, FL 34652
3. The mailing add	ress (if different):
4. Date of incorpor	ation/qualification: 01/08/1997 Document number: <u>P9700000355</u>
5. The name and s Florida Departm	reet address of the current registered agent and registered office on file with the ent of State:
	Fred C. Strickroot
_	6911 SR 54
_	New PORT Richey, FL 34655.
6. The name and s (if changed):	reet address of the new registered agent (if changed) and /or registered office
_	Fred C. Strickroot
_	4421 Madison St, Ste. 10477
_	New PORT RICHEY, FL 34655
The street address as changed will b	of its registered office and the street address of the business office of its registered agent, edentical.
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
(Signature	of an officer or director) Fred SRICKTOOT (Printed or typed name and title)
of my duties, and document is being	e appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligation of my position as registered agent. Or, if this filed merely to reflect a change in the registered office address, I hereby confirm that the een notified in writing of this change.
0	ture of Registered Agent) (Date)
•	· · · · · · · · · · · · · · · · · · ·
If signing on beha	If of an entity:
Fred S	TRICKIONT ed or Printed Name)
(1)	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)