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(Requestor's Na	me)
(Address)	
(Address)	
(City/State/Zip/P	hone #)
PICK-UP WAIT	MAIL
(Business Entity	Name)
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(Document Num	ber)
Certified Copies Certific	ates of Status
Special Instructions to Filing Officer:	
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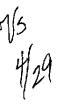


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04/22/05--01021--007 **35.00

RA address Chg-1/5 4/29



COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: HEG OF LEE COUNTY, INC. (Name of corporation)				
DOCUMENT NUMBER: P 97 0000 41 727				
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:				
(Name of contact person)				
HEG OF LEE COUNTY INC				
(Firm/Company)				
11326 ROYAL TEE CIRCLE (Address)				
(Address)				
CAPE CORAL, FL 33991				
(City/state and zip code)				
For further information concerning this matter, please call:				
(Name of contact person) at (239) 443-5720 (Area code & day time telephone number)				
(Name of contact person) (Area code & daytime telephone number)				
Enclosed is a \$35.00 check made payable to the Department of State.				

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

CR2E045(6/04)

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

Pursuant to the provisions of secti statement of change is submitted f in order to change its reg	or a corporation organ	ized under the lav	vs of the State of _	FLORIDA
	=:	•		
The name of the corporation: The principal office address:	11326 Roy	AL TEE	CURCLE 37991	
3. The mailing address (if differen				
4. Date of incorporation/qualificat	ion: 15/12/97	Document t	number: PG	7 0000 4172
5. The name and street address of Florida Department of State:	the current registered a	gent and registere	d office on file wi	th the
KLAU	IS HAMSS			
1211	SW. 49 TH	STREET		2005
LAP	E CORAL,	FL 3391	4	2005 AFK C
6. The name and street address of (if changed):	the new registered agen	nt (if changed) and	d/or registered off	īce
KL	ALL HAMSS			_
1/3	RZ6 ROYAL 7 (P.O. Box NOT acceptable)	RE CIRC	LE	
	(P.O. Box NOT acceptable))		-
	ADE CORAL,	FL 3399	31	_
The street address of its registere as changed will be identical.	d office and the street	address of the bu	siness office of it	ts registered agent,
Such change was authorized by rauthorized by the board, or the co	esolution duly adopted orporation has been no	d by its board of tified in writing	directors or by an of the change.	officer so
I Signature of an officer or direct	ior	k. Hanss	. PRESIDEN	nie)
I hereby accept the appointment I further agree to comply with the of my duties, and I am familiar was document is being filed merely to corporation has been notified in	as registered agent an e provisions of all stat vith and accept the obl o reflect a change in th	d agree to act in utes relative to th igation of my pos e registered offic	• •	
\mathcal{A}		04/19/	05	
(Signature of Registered A	gent)		(Date)	
If signing on behalf of an entity:				
(Typed or Printed Name)				

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