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## REGISTERED AGENT CHANGE

EAGLE DEVELOPMENT INC. OF FERNANDINA BEACH

Certificate of Status	0
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Corporate Filing Menu

## ... Fax Audit No.: H07000258561

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

statement of change i	is submitted for a corporation organiz	, 607.1508, or 617.1508, Florida Statutes, this wed under the laws of the State of Florida ed agent, or both, in the State of Florida.		
1. The name of the co	orporation; Eagle Development Inc. o	f Fernandina Beach		_
2. The principal offic	c address: 1153 Beach Blvd., Jackson	nville Beach, FL 32250	<del>,</del>	_
3. The mailing address	es (if different): PO Box 51584, Jack	sonville Beach, FL 32240		<del>-</del>
4. Date of incorporati	on/qualification: 09/30/1997	Document mumber: P97000085094		_
5. The name and street Florida Departmen		ent and registered office on file with the		
Fole	ey & Lardner LLP	· 		
One	e Independent Drive, Suite 13	300		
Jac	ksonville, FL 32202			
6. The name and street (if changed):	et address of the new registered agent	(if changed) and /or registered office	2007 OCT 22	DIVISION OF CURPURE
<u>F &amp;</u>	L Corp.		CT 2	OF
One	e Independent Drive, Suite 13	900	2	כטגר
Jac	(P.O. Box NOT acceptable)  ksonville, FL 32202		至	2
****	its registered office and the street ac	ddress of the business office of its registered agent,	TT CA	•
Such change was not authorized by the bea	bonized by resolution duly adopted land or the corporation has been notified	by its board of directors or by an officer so fied in writing of the change.		
Tignajary / m	officer of prestor)	Herbert L. Underwood, Jr., President		
hereby accept the a I further agree to con of my duties, and I an document is being fill corporation has been	ppointment as registered agent and inply with the provisions of all statute in familiar with and accept the obliged merely to reflect a change in the infinite in anotified in writing of this change.	agree to act in this capacity es relative to the proper and complete performance ation of my position as registered agent. Or, if this registered office address, I hereby confirm that the	<b>!</b>	
Charles V.	C. Registered Agent)	(Date)		
If signing on behalf o	of an entity:	, ,		
	Irick, Authorized Signatory	,		
(Typed or	Printed Name)			

\* \* \* 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)

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