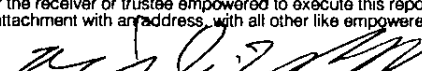


FILED
Apr 07, 2008 08:00 AM
Secretary of State

DOCUMENT # P97000091538 1. Entity Name VICINITY REALTY SERVICES, INC. 		Secretary of S
Principal Place of Business 13024 GULF BLVD. MADEIRA BEACH, FL 33708 Mailing Address 13024 GULF BLVD. MADEIRA BEACH, FL 33708		
DO NOT WRITE IN THIS SPACE		 04032008No Chg-PCR2E034 (11/05) 4. FEI Number 59-3474109 Applied For ☐ Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent PATTISHALL, CHERYL A 161 - 131ST AVE. E MADEIRA BEACH, FL 33708		DO NOT WRITE IN THIS SPACE
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable.(NOTE: Registered Agent signature required when reinstating)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees 04/17/08-80013-001 150.00
10. OFFICERS AND DIRECTORS		
TITLE	D	
NAME	WYCKOFF, MICHAEL W	
STREET ADDRESS	161-131 ST AVE E	
CITY-ST-ZIP	MADEIRA BEACH, FL 33708	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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NAME		
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CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		4/13/08 727-3947365 DateDaytime Phone #