* P98000093069

Kissimmee River Restaurant & Lounge Indian Lake Estates Motel P.O. Box 7423 1 Deland Avenue Indian Lake Estates, FL 33855

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SECRETARY OF STATE
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FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

May 26, 1999

Kissimmee River Restaurant & Lounge Indian Lake Estates Motel P.O. Box 7423, 1 Deland Avenue Indian Lake Estates, FL 33855

SUBJECT: INDIAN LAKE ENTERPRISE, INC.

Ref. Number: P98000093069

We have received your document for INDIAN LAKE ENTERPRISE, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file your document is \$35.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6901.

Susan Payne Senior Section Administrator

Letter Number: 299A00029088

MENTER SAFERATION

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

	· ·
- Pursuant to the provisions of sections 607.0502, 6	17.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the law	ws of the State of
submits the following statement in order to change it	its registered office or registered agent, or both, in
the State of Florida.	· · · · · · · · · · · · · · · · · · ·
1. The name of the corporation is: <u>INDIAN</u>	LAKE ENTERPRISE INC
-	
,	
2. The mailing address of the corporation is: P. C.	, Box 7423
INDIAN LAKE ESTATES, FL 33	3855 = 7423
,	Document number: P9 80000 93069
4. The name and address of the current registered age	ent and office
MICHAEL A LIVINGST	
1. DELAND AVE.	
TN OT AN LAKE EST. 5. The name and address of the new registered agent	ATES FL 33855
	and office: (F.O. Box 1401 Acceptable)
JACQUELYN BARBER	
23 CAMP TIGER	SAMKEEN Rd = ==
LAKE WALES FL 3	SH 9 E
	The state of the s
agent, as changed, will be identical.	reet address of the business office of its registered
Such change was authorized by resolution duly ador	
authorized by the board.	
(Signature of an officer, chairman or vice chairman of the b	<u>¥ 5- 7-99</u>
(Signature of an officer, chairman or vice chairman of the f	(Date)
* JOYCE A. Smith	
(Printed or typed name and title)	
Having been named as registered agent and to acce corporation, I hereby accept the appointment as reg	ept service of process for the above stated
I further agree to comply with the provisions of all sperformance of my duties, and I am familiar with a	statutes relative to the proper and complete
registered agent.	na accept the obligation of my position as
Daganel Barbar	√-2 09 <u>=</u>
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	The second secon
JACQUE LUN BARRER	DRESIDENT
(Typed or Printed Name)	(Capacity)
TE OF FLORIDA NTY OF BAY * * FILL UNIC FIE	213. 026.00 to the state
nowledged before me this 5/7/99 by Joyce A. Si	F: \$35.00 *** mith who presented FL DL #S530-421-49-650-0 as ID.
CR2E045(7/97) DIVISION OF CORPORATIONS P.O. BOX	6327 THE AMASSET DE 2023 Not and Public
P.O. BOX	Lynda K Breegle
	★ My Commission CC885128 ****** Expires August 25, 2001
	-r