

# P99000027016

9/21/99

Florida Department of State Division of Corporations P.O.Box 6327 Tallahassee, Florida 32314

Re. Number W99000005558

#### CHANGE OF ADDRESS AND REGISTERED AGENT

Please be advised that all correspondence should be mailed to our place of business, which is as follows:

> FLORIDA SUNSHINE VACATION HOMES, INC. 1908 E. Osceola Parkway Kissimmee, Fl. 34743

> > Telephone: (407) 344-0029 Fax: (407) 348-1333

The new registered agent for the above mentioned corporation shall be:

ALFONSO MUELLE 10100 Canopy Tree Ct. Orlando, Florida 32836

Please update your records to expedite all future correspondence.

Sincerely

Aida L. Muelle

President



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 28, 1999

AIDA L. MUELLE FLORIDA SUNSHINE VACATION HOMES 1908 E. OSCEOLA PARKWAY KISSIMMEE, FL 34743

SUBJECT: FLORIDA SUNCHINE VACATION HOMES, INC.

Ref. Number: P99000027016

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6905.

Thelma Lewis
Corporate Specialist Supervisor

Letter Number: 499A00047384

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

* * * FILING FEE: \$35.00 * * *
(Typed or Printed Name) (Capacity)
(Signature of Registered Agent) (Date) (Date)
10/12/99
performance of my ditties, and I am familiar with and accept the obligation of my position as registered agent.
corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete overformance of my futies, and I am familiar with and accept the obligation of my position as
(Printed or typed name and title)  Having been named as registered agent and to accept service of process for the above stated
Aida-L- Muelle
(Signature of an officer, chairman or vice chairman of the board) (Date)
authorized by the logard.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Orlando F1-32836
10100 CANOPY Tree ct.
A Fooso Ruele
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
7125 BAY Dr. #505
Chirles Y- Leon?
4. The name and address of the current registered agent and office:
3. Date of incorporation/qualification: 3/24/99 Document number: P9900027016
2. The mailing address of the corporation is: 1908 E-Osceolar PKWAY  Kissinnee & (- 34743
1. The name of the corporation is: Florida Sunshine UACHtion Homes, Inc.
State of Florida.
submits the following statement in order to change its registered office or registered agent, or both, in the
undersigned corporation organized under the laws of the State of $\sqrt{(cr) \lambda \omega}$

CR2E045(7/97)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314



### ACKNOWLEDGEMENT AND CONSENT OF REGISTERED AGENT

Having been named Registered Agent to accept services of process for FLORIDA SUNSHINE VACATION HOMES, INC. at the Registered Agent Office:

10100 Canopy Tree Ct. Orlando, Florida 32836

I hereby accept such status and consent to act in this capacity and agree to comply with all the requirements of law pertaining thereto.

ALFONSO MUELLE