2003 FOR PROFIT CORPORATION



FILED Mar 13, 2003 8:00 am

DOCUMENT # P99000087846 1. Entity Name M P NICHOLSON HOUSE, INC.						03-13-2003 90083 031 ***150.00				
Principal Place of Business 1605 SNOW AVENUE TAMPA FL 33606		Mailing Address 1605 SNOW AVENUE TAMPA FL 33606					,			
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2. Principal	Place of Busin	ness	3. Mailing Address	. "		T \$800f)	001 510 50350 50361 00451 .	1888) 68 491 68 84	4	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & Sta	ate		City & State			4. FEI Numb	per 59-360089 -	4		Applied For
Zip		Country	Zip	Country		5. Certificate	e of Status Desired		\$8.75 A	
	6. Name	and Address of Curr	ent Registered Agent			7. Name and	d Address of New	Registered	Fee Requir	<u>ea : : : : : : : : : : : : : : : : : : :</u>
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GASSMA	n, alan s e	SQ.		-	9 C07	7 Ju	ope E	19		
1245 CO	urt street	•		Stree	t Address (P.	O. Box Numb	er is Not Acceptab	le) <i>O</i>		
SUITE 10				24.	50 SUN	SET P	DINT ROA	D SU	TITE [)
CLEARWATER FL 33756					city Clearwater FL zig 33765					
8. The above	e named entity	submits this statemer	nt for the purpose of changing	its registered office	or registered	agent, or bo	th, in the State of F	lorida. Lan	familiar with	, and accept
SIGNATURE	Se	Mr.	Luge				•	3-10	-03	
trie obliga	Se	or printed name of registered a	gent and title if applicable. (N	OTE: Registered Agent siç	nature required wi	nen reinstating)	•	3 -10 DATE	-03	
SIGNATURE	Signature, typed of	or printed name of registered at		OTE: Registered Agent sig	nature required wi		÷	DATE		
SIGNATURE F	Signature, typed of	or printed name of registered at FEE IS \$150.00 3 Fee will be \$550.	00	OTE: Registered Agent sig	nature required wi	9. Eld	ection Campaign Fust Fund Contributi	DATE	_ \$5.0	00 May Be
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of the corporation or the receiver or trustee empowered to execute his proof 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 empty end.

SIGNATURE:

813-258-299