523416

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August 23, 2000

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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Dear Sirs:

I enclose herewith a Statement of Change of Registered Office or Registered Agent for the following entities, together with corresponding checks for each entity:

1. Independence Court of Ormond Beach Associates, Ltd.

2. William T. Tinsley, III, P.A.

If you have any questions or if you need anything further, please contact

me.

Very truly yours,

Ansbacher & Schneider, P.A.

Michael N. Schneider

MNS/lj Encl. 00-112.55

RA address Chg.

V. SHEPARD SEP 8 2000

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

the undersigned corporation organized under the laws of submits the following statement in order to change its rethe State of Florida.	egistered office or registered agent, or both, in
1. The name of the corporation is: William T. Tinsley, III, P.A.	
2. The mailing address of the corporation is:	4929 Atlantic Boulevard
Jacksonville, FL 32207	
3. Date of incorporation/qualification: 1/7/1991	Document number: S23416
4. The name and address of the current registered agent a	and office:
Michael N. Schneider	
4215 Southpoint Boulevard Suite 100 Jacksonville, FL 32216	office: (P. O. Box Not Acceptable)
5. The name and address of the new registered agent and	office: (P. O. Box Not Acceptable)
Michael N. Schneider	
5150 Belfort Road Building 100	<u> </u>
Jacksonville, FL 32256	and the second to the second
The street address of its registered office and the street agent, as changed, will be identical.	
Such change was authorized by resolution duly adopted authorized by the board.	l by its board of directors or by an officer so
(Signature of an officer, chairman or fice chairman of the board	7/25/00 (Date)
	, , , , , , , , , , , , , , , , , , ,
William Tinsley (President (Printed or typed name and title)	· · · · · · · · · · · · · · · · · · ·
Having been named as registered agent and to accept s corporation, I hereby accept the appointment as registe I further agree to comply with the provisions of all state performance of my duties, and I am familiar with and a registered agent.	service of process for the above stated ered agent and agree to act in this capacity. Utes relative to the proper and complete accept the obligation of my position as
My. Le	8/15/00
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	

CR2E045(7/97)