(Requ	estor's Name)	
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(City/S	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busir	ness Entity Na	me)
(Docu	ment Number))
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer:	-
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CT Corporation

1203 Governors Square Blvd. Suite 101 Tallahassee, FL 32301-2960

850 222 1092 tel 850 222 7615 fax www.ctcorporation.com

December 21, 2011

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 8336804 SO

Customer Reference 1: None Given

Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Executive Appointments, Inc. (FL) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	EXECUTIVE APPOINTMENTS, INC. Name of Corporation	_			
	Name of Corporation				
DOCUMENT NUMBER	S57974				
The enclosed Statement of	of Change of Registered Office/Agent and fee are submitted fo	r filing.			
Please return all correspor	ndence concerning this matter to the following:				
	Name of Contact Person				
	Firm/Company	_			
	Address				
	City/State and Zip Code	_			
	City/State and Zip Code				
 -		<u> </u>			
E-mai	il address: (to be used for future annual report notificatio	n)			
For further information co	oncerning this matter, please call:				
	at ()				
Name of C	Contact Person at () Area Code & Daytime Tel	lephone Number			
Enclosed is a \$35.00 check	k made payable to the Department of State.				
M	Mailing Address: Amendment Section Street Address: Amendment Section				

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

CR2E045 (8/05)

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

statement of cha	ange is submitted for a co	rporation organize	607.1508, or 617.1508, Florida St ed under the laws of the State of $\frac{F}{F}$	lorida
	0 0		ed agent, or both, in the State of Flo ENTS, INC.	orida.
1. The name of	the corporation: EXECUT			
	office address: 247 N WI	ESTMONTE DR		
	ΓE SPRINGS FL 32714			<u> </u>
	address (if different): 247 NTE SPRINGS FL 32714	N WESTMONTE I	DR	
4. Date of incor	poration/qualification:	06/07/1991	Document number:	S57974
	d street address of the current of State: (If resigne		ent and registered office on file with	1 the
	RICHARD J. FILDES			
	215 N EOLA DR			4. .
	ORLANDO FL 32801			11 PEC SECRE FALL AH
6. The name and (if changed):	d street address of the new	registered agent ((if changed) and /or registered office	22 ASSE
	C T Corporation System			
	c/o C T Corporation Syste	em, 1200 South Pin	ne Island Road	
		P.O. Box NOT a	cceptable	7. 30
	Plantation, Florida 33324			
The street addreas changed will	ess of its registered office be identical.	e and the street ac	ddress of the business office of its	registered agent,
Such change wa authorized by the	as authorized by resoluting board, or the corporat	on duly adopted bion has been notif	by its board of directors or by an of the change.	officer so
FW.	8 Boll		Kristin Bolden, Secret	•
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as regi to comply with the provi nd I am familiar with and ing filed merely to reflect s been notified in writing	stered agent and sions of all statute l accept the oblige t a change in the s of this change.	agree to act in this capacity. es relative to the proper and compation of my position as registered registered office address, I hereby	
	Corporation System	_	12/15/2011	
	nature of Registered Agent		Date	
If signing on be	chalf of an entity: es M. Halpin			
Assia	stant-Secretary			

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)