

ACCOUNT NO. :

072100000032

REFERENCE

611659

4713582

AUTHORIZATION

COST LIMIT

\$ 35.00

ORDER DATE: November 24, 1997

ORDER TIME :

9:47 AM

ORDER NO. :

611659 055

700002357747-

CUSTOMER NO:

4713582

CUSTOMER:

Mr. Jeff Lorenz

Bluegreen Corporation

Suite 400

5295 Town Center Road Boca Raton, FL 33486

#### CHANGE OF AGENT

NAME:

INTERVAL RESORT PROPERTY

MANAGEMENT, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XXXX PLAIN STAMPED COPY

CONTACT PERSON: Stacy L Earnest

PA Chang 12-1-97



### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 26, 1997

CSC STACY L. EARNEST TALLAHASSEE, FL RESUBMIT

Please give original submission date as file date.

SUBJECT: INTERVAL RESORT PROPERTY MANAGEMENT, INC.

Ref. Number: S80787

We have received your document for INTERVAL RESORT PROPERTY MANAGEMENT, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6906.

Darlene Connell Corporate Specialist

Letter Number: 997A00056530

## Florida Department of State, Jim Smith, Secretary of State

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

·		<u> </u>	
Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office or registered agent, or both, in the State Florida.			
1a. The name of the corpora	tion is:PROPERTY MANAGEMENT, INC.		
1b. Date of incorporation:		Document number	
The name and address of DONNA SAGE	f the current registered ag	ent and office:	
12995 CLEVELAND AVE.	FT. MYERS	FLORIDA	33907
<ol><li>The name and address of (P.O. Box Not A</li></ol>	the new registered agent Acceptable)	and office:	E T
CORPORATION SERVICE COMPA	NY		超 26 日
1201 Hays Street, Tallahassee, Florid	la 32301		FIG. R
The street address of its regis of its registered agent as chai	stered agent and the street aged will be identical.	t address of the bu	Siness office
Such change was authorized an officer so authorized by the Signature   Signature   Date	e board.  PATRICK 6	d by its board of dir RWAEAU SEC or printed name and	RETARY
HAVING BEEN NAMED AS REPROCESS FOR THE ABOVE SON THIS CERTIFICATE, I HERITAGENT AND AGREE TO ACTIVITH THE PROVISIONS OF APLETE PERFORMANCE OF MY POST	STATED CORPORATION A EBY ACCEPT THE APPOIN IN THIS CAPACITY. I FU ALL STATUTES RELATIVE Y DUTIES, AND I AM FAN SITION AS REGISTERED A CORPO	AT THE PLACE DES NTMENT AS REGIS URTHER AGREE TO TO THE PROPER .	SIGNATED STERED COMPLY AND COM- ACCEPT COMPANY