## 731984

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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June 10, 2010

MILDRED J. NASTA CLEARWATER SAIL & POWER SQUADRON 1000 CLEVELAND ST CLEARWATER, FL 34615-4514

SUBJECT: CLEARWATER SAIL AND POWER SQUADRON, INC.

Ref. Number: 731984

We have received your document for CLEARWATER SAIL AND POWER SQUADRON, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Per our telephone conversation on 6/10/10, we are enclosing the statement of change of registered office/agent form. Please complete and return to this office for proper filing.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 610A00014440

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Clearater Sail & Pawer Squadron, me
DOCUMENT NUMBER:
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Milchel NASIA  Name of Contact Person
Cleanwater Saila Paule Brewelier
1000 Chusland ST. Address
Clear water of 33764 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mildred MASTA at (127) 447-0789  Name of Contact Person Area Code & Daytime Telephone Number
D 1 1' 000 00 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of cha	provisions of sections 60 inge is submitted for a co r to change its registered	prporation organized	under the laws of the S	State of Alore de	<u> </u>
	the corporation: Cloco office address: 1000	· (NI.o.ol)	aif And Pawe and Str	Squadro	D, INC
3. The mailing a	ddress (if different):	<u> </u>	- Mu		
4. Date of incorp	poration/qualification:	2-20-1175	_ Document number: _	73/984	
Florida Depar 6. The name and (if changed):	Largo Largo  I street address of the new  M: Idree  1920  Clear	w registered agent (if  No Ded  LDWe F  33  w registered agent (if  Masta  P.O. Box NOT accordance Safter, F	changed) and /or regis	tered office	10 JUN 25 PM 3: 37
	ess of its registered office be identical.				agent,
Such change wa authorized by th	as authorized by resolut ne board, or the corpora	ion duly adopted by tion has been notific	its board of directors ed in writing of the cha	or by an officer so ange.	_
Signatiti	the appointment as reg to comply with the provid I am familiar with an ing filed merely to reflect to been notified in writing	istered agent and ag isions of all statutes d accept the obligat ct a change in the re g of this change.	Printed or typed gree to act in this cape relative to the proper ion of my position as a gistered office address.	name and title	mance if this nat the
milde	LO Past nature of Registered Agent		June 24.	2010	
If signing on be	chalf of an entity:		·		
T	yped or Printed Name				

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

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