

749933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

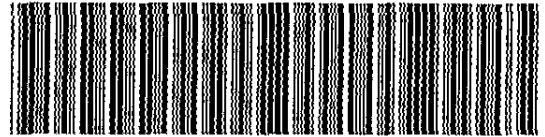
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200022173862

08/28/03--01039--009 **35.00

FILED
03 AUG 28 PM 3:47
TALLAHASSEE, FLORIDA

RA+D chg
MAD 9/5

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FLORIDA ASSOCIATION FOR THE GIFTED
(Name of corporation)

DOCUMENT NUMBER: 749933

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:

Ms. Lois Lee

(Name of person)

Florida Association for the Gifted

(Name of firm/company)

19711 N.W. 7th Street

(Address)

Pembroke Pines, FL 33029

(City/state and zip code)

For further information concerning this matter, please call:

Lois Lee

(Name of person)

at (954) 430-0740 / 305 995-7296

(Area code & daytime telephone number)

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
409 E. Gaines Street
Tallahassee, FL 32399

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Florida Association for the Gifted (FLAG), IACC.
2. The principal office address: 734 Jefferson Avenue
Lakeland, FL 33801
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 11/28/1979 Document number: 749933

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: Terry S. Wilson
5101 Lake in the Woods Boulevard
Lakeland, FL 33813

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Ms. Lynne Locke
(P.O. Box or personal mailbox NOT acceptable)
734 Jefferson Avenue, Lakeland FL, 33801

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Lois Lee
(Signature of an officer, chairman or vice chairman of the board)

Lois Lee
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Lynne Locke
(Signature of Registered Agent)

8/14/03
(Date)

If signing on behalf of an entity:

Lois Lee
(Typed or Printed Name)

Treasurer
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILED
03 AUG 28 PM 3:37
TALLAHASSEE, FLORIDA