

N00000005982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

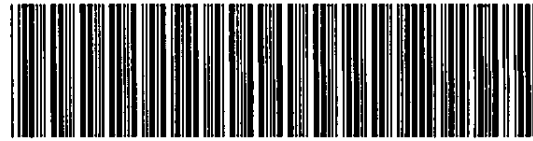
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2017 JAN 19 AM 10:59

JAN 23 2017
C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Military Heritage Museum
Name of Corporation

DOCUMENT NUMBER: N00000005982

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:

Lori L. Howard
Name of Contact Person

Military Heritage Museum
Firm/Company

1200 W. Retta Esplanade, #48
Address

Punta Gorda, FL 33950
City/State and Zip Code

lhoward@freedomisntfree.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lori L. Howard at (941) 575-9002
Name of Contact Person 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: Military Heritage Museum, Inc.
- 2. The principal office address: 1200 West Retta Esplanade, #48; Punta Gorda, FL 33950
- 3. The mailing address (if different): same

4. Date of incorporation/qualification: 09/05/2000 Document number: N00000005982

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Kim Lovejoy (RESIGNED)

1200 W. Retta Esplanade, Unit 48

Punta Gorda, FL 33950

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

Lori L. Howard

1200 W. Retta Esplanade, #48

P.O. Box NOT acceptable

Punta Gorda, FL 33950

2017 JAN 19 AM 10:59
STATE DEPARTMENT OF REVENUE

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.

Lori L. Howard
Signature of an officer or director

Lori L. Howard, Executive Director
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.

Lori L. Howard
Signature of Registered Agent

01/16/2017
Date

If signing on behalf of an entity:

Typed or Printed Name

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