

NCS00000017SZ

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

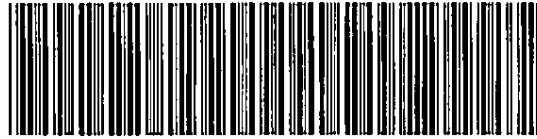
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2020 APR -3 PM 1:02

QM
4/8/20

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Citrus County Jeepers
Name of Corporation

DOCUMENT NUMBER: N08000001782

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:

Frank W Meyer
Name of Contact Person
Citrus County Jeepers
Firm/Company
1440 W Noble St.
Address
Lecanto, FL 34461
City/State and Zip Code

citruscountyjeepers@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank W Meyer at (352) 220-0345
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2020

FRANK W MEYER
1440 W NOBLE ST.
LECANTO, FL 34461

SUBJECT: CITRUS COUNTY JEEPERS INCORPORATED
Ref. Number: N08000001782

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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) 245-6050.

Querida R Moore
Regulatory Specialist II

Letter Number: 520A00006351

2020 MAR 24 7:15

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: CITRUS COUNTY JEEPERS INCORPORATED

2. The principal office address: 1440 W Noble St. Lecanto, FL 34461

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/22/2008 Document number: N08000001782

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)

resigned

gaudette, bobby

tbd, tbd, FL 34464

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

Frank W Meyer

1440 W Noble St.

P.O. Box NOT acceptable

Lecanto, FL 34461

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DIVISION OF CORPORATIONS
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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.

[Signature]
Signature of an officer or director

James Black VP
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.

Frank W Meyer
Signature of Registered Agent

3-30-2020
Date

If signing on behalf of an entity:

James Black
Typed or Printed Name

*** 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 (04/13)