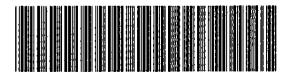


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COVER LETTER

TO:		ent Section of Corporations		
SUBJ	ECT:	Community Coalit	ion Alliance, Inc.	·
		Name of	Corporation	
DOC	UMENT NI	UMBER: NO	8000009955	
The e	nclosed State	ement of Change of Registered Off	ice/Agent and fee are submitted for fili	ng.
Please	return all co	orrespondence concerning this mat	ter to the following:	
	,		· ·	
			Woodford	
		Name of C	Contact Person	
		Community Coa	alition Alliance, Inc.	
			Company	
			rona Drive	
		Ac	ddress	
		F	N- n-h El 00004	
		<u>Fernandina E</u> City/State	Beach, FL 32034 and Zip Code	
	•	elwoodforde	@yahoo.com future annual report notification)	
		Di man address. (to oe asea for	rature aimaar report notification,	
For fu	rther inform	ation concerning this matter, please	e call:	
		Susan Woodford	at (904) 335-1	1597
	Na	me of Contact Person	at (904) 335-1 Area Code & Daytime Telepho	one Number
Enclo	sed is a \$35.	00 check made payable to the Depa	artment of State.	
		Mailing Address:	Street Address:	
		Amendment Section Division of Corporations	Amendment Section Division of Corporations	8
		P.O. Box 6327	Clifton Building	
		Tallahassee, FL 32314	2661 Executive Center C	Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 22, 2011

SUSAN WOODFORD 435 CITRONA DRIVE FERNANDINA BEACH, FL 32034

SUBJECT: COMMUNITY COALITION ALLIANCE, INC.

Ref. Number: N08000009955

We have received your document for COMMUNITY COALITION ALLIANCE, 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):

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) 245-6916.

Letter Number: 811A00026442

Carol Mustain Regulatory Specialist II

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 7, 2011

SUSAN WOODFORD 435 CITRONA DRIVE FERNANDINA BEACH, FL 32034

SUBJECT: COMMUNITY COALITION ALLIANCE, INC.

Ref. Number: N08000009955

We have received your document for COMMUNITY COALITION ALLIANCE, 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):

You failed to make the correction(s) requested in our previous letter.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 0.11A00027420

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: Community Coalition Alliance Inc.
2. The principal office address: 435 Citron Dr. Fernandina Beach
FL 32034
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/27 20% Document number: NO8 000009955
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)
<u>Carrie Baird</u>
135 Executive Circle Suite 102-
Daytona Beach, 72. 32114 ES =
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Suppose Wood Good 435 Citrona Dr. P.O Box NOT acceptable Fernandina Brach, FL 32034
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 of an officer or director Integral Debi Mac Toture Chair
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. Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

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