

N30791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

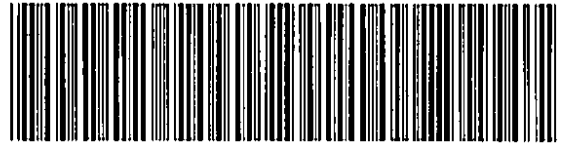
(Business Entity Name)

(Document Number)

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SEP 10 2021

ALBRITTON

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Audubon Country Club  
Name of Corporation

**DOCUMENT NUMBER:** N30791

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:

Christie Seddon

Name of Contact Person

Audubon Country Club

Firm/Company

625 Audubon Boulevard

Address

Naples, FL 34110

City/State and Zip Code

[cseddon@auduboncountryclub.org](mailto:cseddon@auduboncountryclub.org)

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christie Seddon

Name of Contact Person

at

815

545-0107

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

**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: Audubon Country Club

2. The principal office address: 625 Audubon Boulevard Naples, FL 34110

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 02/21/1989 Document number: N30791

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)

ROELLER, MARY LYNN  
625 AUDUBON BLVD  
NAPLES, FL 34110

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

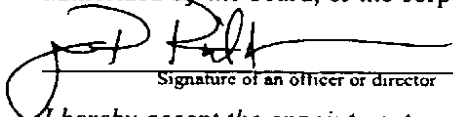
Christie Seddon  
625 AUDUBON BLVD  
NAPLES, FL 34110  
P.O. Box NOT acceptable

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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 of an officer or director

J.P. Richardson Director & Treasurer  
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.*

  
Signature of Registered Agent

8/24/2021  
Date

If signing on behalf of an entity:  
\_\_\_\_\_  
Typed or Printed Name

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