## Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850) 617-6380

Account Name : AKERMAN SENTERFITT (ORLANDO)

Account Number: 076656002425

Phone : (407)423-4000 Fax Number : (407)843-6618 254 - 4269

## REGISTERED AGENT CHANGE

PLANNED GIVING COUNCIL OF CENTRAL FLORIDA, INC.

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8/12/2009

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607 statement of change is submitted for a corporation organized u in order to change its registered office or registered at	nder the laws of the State of Florida	<u></u>
1. The name of the corporation: Planned Giving Coun		
The principal office address: c/o Stephen Dunegan, E. Orlando, Florida 32801		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 03/16/1989	Document number: N3123	)2
5. The name and street address of the current registered agent a Florida Department of State: (If resigned, enter resigned)		O9 AL
Stephen D. Dunegan	Ä	<u></u>
800 N. Magnolia Avenue, Suite 1500	)	图7
Orlando, Florida 32803		의 R E
6. The name and street address of the new registered agent (if changed):	hanged) and /or registered office	3: 07
Stephen D. Dunegan		
420 S. Orange Avenue, Suite 1200		
P.O. Box. NOT accept	able	
Orlando, Florida 32801		
The street address of its registered office and the street address changed will be identical.	ss of the business office of its registere	d agent,
Such change has authorized by resolution duly adopted by i authorized by the board, or the corporation has been notified	ts board of directors or hy an officer so in writing of the change.	
May Vin	Stephen D. Dunegan, Directo	<u>r</u>
Signulate of an officer or arcelor  I hereby accept the appointment as registered agent and agr I further agree to comply with the provisions of all statutes r of my duties, and I am familiar with and accept the obligatio document is being filed merely to reflect a change in the reg corporation has been notified in writing of this change.		
Market	August (2, 2009	
Signature of Registered Agent  If signing on behalf of an entity:	i.rate	
Typed or Printed Name		
+ + + PH INC PPE. P	35 AO 4 4 A	

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

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