703101

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	, Certificates	s of Status
Special Instructions to F	Filing Officer:	





700370580087

R. 1445 TE AUG 1 1 2021 TO: Amendment Section Division of Corporations

Name of Corporation	
DOCUMENT NUMBER: 703101	
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Johnson Bell	
Name of Contact Person	
Lakewood Park United Methodist Church	
Firm/Company	
5405 Turnpike Feeder Road	
Address	
Fort Pierce, Florida 34951	
City/State and Zip Code	
secretary@lakewoodparkumc.org	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please of	mall:
For further information concerning this matter, please c	zan.
Johnson Bell	at (772)475-7742
Name of Contact Person	at (772) 475-7742 Area Code & Daytime Telephone Numb

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

Amendment Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

statement of cha	nge is submitted for a corpor	92, 617.0502, 607.1508, or 617.1508, Florida Statute ation organized under the laws of the State of Floridace or registered agent, or both, in the State of Floridace	a	
1. The name of t	he corporation: Lakewood Pa	rk United Methodist Church		
2. The principal	office address: 5405 Turnpike	Feeder Road		
2. The principal	Fort Pierce, Flo	orida 34951-2363		
3. The mailing a	ddress (if different): P O Box	651278 Vero Beach, FL 32965-1278		
-		Document number:		
5. The name and		registered agent and registered office on file with the		
	Bernie Kilbreth		`.	
	5405 Tumpike Feeder Road		-	
	Fort Pierce, Florida 34951-23	63	. 3 . 3	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		istered agent (if changed) and /or registered office	;;; 9; ₂₁ ;	
	Johnson Bell			
	5405 Tumpike Feeder Road			
		P.O. Box NOT acceptable		
	Fort Pierce, Florida 34951-23	63		
The street address changed will	ess of its registered office and be identical.	I the street address of the business office of its regis	stered agent,	
Such change wa authorized by th	is authorized by resolution d ne board, or the corporation b	uly adopted by its board of directors or by an office has been notified in writing of the change.	r so	
(1)	htter	Jeff Arthur		
9	re of an officer or director	Printed or typed name and title		
I further agrée (of my duties, an document is bei	a comple with the provision	ed agent and agree to act in this capacity. s of all statutes relative to the proper and complete ept the obligation of my position as registered agen hange in the registered office address, I hereby con his change.	performance 1. Or, if this firm that the	
Phin	la Deil	July 13, 2021		
Sig	nature of Registered Agent	Date		
If signing on be	half of an entity:			
Johnson Bell				
	eped or Printed Name			
	* * * F	ILING 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)