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10/30/09--01008--006 \*\*35.00

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

statement of chang	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stating is submitted for a corporation organized under the laws of the State of to change its registered office or registered agent, or both, in the State of Flori	LORI		
1. The name of the	e corporation: HARBOR CITY BAPTIST CHURC	2//		
2. The principal o	office address: 2711 N. HARBOR CITY BUD.  MELBOURUE, FL 32935			
	MELBOURNE, FL 32935		<del></del>	
	dress (if different): SPINE	<del>.,,</del>	<del></del>	<del>, ,</del>
4. Date of incorpo	oration/qualification: 4/11/63 Document number:			
	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)	he		
-	RESIGNED			
_				
_		≓'s	2	
6. The name and s (if changed):	street address of the new registered agent (if changed) and /or registered office	ECRETA LLAHAS	2009 OCT <i>3</i> 0	47.00
_	JEFFERY MITCHELL	RY (	8	-
	2711 N . HARBOR CITY BLVD	开心	AH	N
-	P.O. Box NOT acceptable		7:-	
-	MELBOURNE, FLORIDA 32935	<b>≯</b> '	Ċī	
The street addres as changed will b	ss of its registered office and the street address of the business office of its repe identical.	egistered	agent,	
	s authorized by resolution duly adopted by its board of directors or by an of board, or the corporation has been notified in writing of the change.	ficer so		
Korolde	County E. Currenthal. Printed or director	? Per	אשופא	サ
I hereby accept to I further agree to of my duties, and document is bein	the appointment as registered agent and agree to act in this capacity. In comply with the provisions of all statutes relative to the proper and completed I am familiar with and accept the obligation of my position as registered age filed merely to reflect a change in the registered office address. I hereby to be notified in writing of this change.	ete perfo igent. Oi confirm t	rmance r, if this hat the	
	ature of Registered Agent Date			
If signing on beh				
Jetter Typ	y L. Mitchell ped or Printed Name			

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

## **COVER LETTER**

Amendment Section

Division of Corporations
SUBJECT: HARBOR CITY BAPTIST CHURCH Name of Corporation
Name of Corporation
DOCUMENT NUMBER: UNEV.
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:
JEFFERY MITCHELL Name of Contact Person
Name of Contact Person
HARBAR CITY BARTIST CHURCH
HARBOR CITY BAPTIST CHURCH Firm/Company
2711 N. HARBOR CITY BLUD. Address
Address
MELBOURNE, 7L 32935  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
heitybe @ Dellsouth. Ne
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TEFF MITCHELL at (32) 254-8879  Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address: Amendment Section Amendment Section
Division of Corporations  Division of Corporations
P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314