

711451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

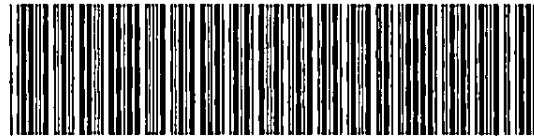
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Palma Ceia United Methodist Church, Inc.

Name of Corporation

DOCUMENT NUMBER: 711451

The enclosed Statement of Change of Registered Office/Agent and fec are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rev. Bruce Toms

Name of Contact Person

Palma Ceia United Methodist Church, Inc.

Firm/Company

3723 Bay to Bay Boulevard

Address

Tampa, FL 33629

City/State and Zip Code

bruce.toms@palmaceiaumc.org

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

For further information concerning this matter, please call:

Rev. Bruce Toms

813

837-1541

Name of Contact Person

at ()

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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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: Palma Ceia United Methodist Church, Inc.
2. The principal office address: 3723 Bay to Bay Boulevard, Tampa, FL 33629

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 09/06/1966 Document number: 711451

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)

David T. Knight
101 E. Kennedy Boulevard, Suite 3708
Tampa, FL 33602


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

John M. Murray
101 E. Kennedy Boulevard, Suite 1810
Tampa, FL 33602

P.O. Box NOT acceptable

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

Craig Chalmers, Chair of Board of Trustees

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

March 26, 2019

Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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