7226/4

questor's Name)				
dress)				
dress)				
y/State/Zip/Phone	e #)			
☐ WAIT	MAIL			
siness Entity Nan	ne)			
(Document Number)				
Certificates	of Status			
Special Instructions to Filing Officer:				
	dress) dress) //State/Zip/Phone WAIT siness Entity Nan cument Number) Certificates			





300270937953

03/25/15--01026--015 **35.00

15 MAR 25 AM 9: 5

SECRETARY OF STATE
TALLAHASSEE FLORID

WAR 31 2015 T. CARTER

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Venice Gulf 101 DAV

Name of Corporation

OCUMENT NUMBER, 1220

722614

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:

Wayne Kozich

Name of Contact Person

Venice Gulf 101 (Chapter Day 101

Firm/Company

600 Colonia Ln

Address

Nokomis, FL 34275

City/State and Zip Code

venicegulf101@gmail.com

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

For further information concerning this matter, please call:

Wayne Kozich

,,941

488-4500

Name of Contact Person

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

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida ange is submitted for a corporation organized under the laws of the State of er to change its registered office or registered agent, or both, in the State of	/ Florida	<u> </u>	
	the corporation: Venice GulfChapter #101 Disabled Americal office address: 600 Colonia Ln E.	tan V	eter	ans, Iwo
	, FL 34275			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 2/7/72 Document number: 7226	14		
	d street address of the current registered agent and registered office on file artment of State: (If resigned, enter resigned)	with the	!	
	Ron Felicita			
	341 S. Venice Blvd		15 H	SECF
	Venice, FL 34293		MAR 25	
6. The name an (if changed):	d street address of the new registered agent (if changed) and /or registered of	office	5 AM 9:5	NY OF \$1
	Wayne Kozich	_	57	ATE DRID,
	324 Beach Rd	<u></u>		P
	P.O. Box NOT acceptable			
	Venice, FL 34285-3708	_		
The street addr as changed wil	ress of its registered office and the street address of the business office of all be identical.	its regis	stered	agent,
()	vas authorized by resolution duly adopted by its board of directors or by a the board, or the corporation has been notified in writing of the change.	n office	r so	
Duha	Richard Soja			
I hereby accept I further agree	t the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and cap find duties, and I am familiar with and accept the obligation of my positions document is being filed merely to reflect a change in the registered off in that the corporation has been notified in writing of this change.	omplete on as re	egister Fess, I	ed
Wagne	R. Korich 03/22/15 Ignature of Rogertered Agent Date			
If signing on be	ehalf of an entity:			
	Typed or Printed Name			
	* * * FILING FEE: \$35.00 * * *			