

729111

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

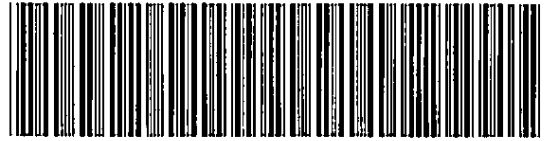
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gulf Harbors Civic Association Charitable Fund
Name of Corporation

DOCUMENT NUMBER: 729 111

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:

Paris Tsiornikas
Name of Contact Person
Gulf Harbors Civic Association Charitable Fund
Firm/Company
4610 Floramar Terrace
Address
New Port Richey FL 34652
City/State and Zip Code
E-mail address: (to be used for future annual report notification) GHCFA-Treasurer@gmail.com

For further information concerning this matter, please call:

Paris Tsiornikas at (727) 848-0596
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

20 JUN 26 11:45
DEPT. OF STATE
DIVISION OF CORPORATIONS

**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: Gulf Harbors Civic Association Charitable Fund
2. The principal office address: 4610 Floramar Terrace
New Port Richey FL 34652
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 3/20/1974 Document number: 729111
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)
Resigned - Richard Haskell

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

Paris Tsirnikas
4610 Floramar Terrace
New Port Richey FL 34652

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.

Arthur Haedike
Signature of an officer or director

ARTHUR HAEDIKE, PRES.
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.

Paris Tsirnikas
Signature of Registered Agent

6/22/2020
Date

If signing on behalf of an entity:

Paris Tsirnikas
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 (04/13)

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