# 737243

(Fi	Requestor's Name)		
Α)	address)		
A)	address)		
(C	City/State/Zip/Phone #)	<u> </u>	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			

Office Use Only



000276341120

08/27/15--01006--005 \*\*35.00

15 AUG 27 PM 3: 58

SECRETARY OF STATE TALLAHASSEE, FIORIDA

AUG 2 8 2015 T CANNON

#### **COVER LETTER**

TO: Amendment Section Division of Corporations

# SUBJECT: Highlands Grace Reformed Church, Inc.

Name of Corporation

DOCUMENT NUMBER: /3/243

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:

## Ross Benschoter

Name of Contact Person

Firm/Company

1561 Lakeview Dr. #941

Address

Sebring, Florida 33870

City/State and Zip Code

## dadbenschoter@gmail.com

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

For further information concerning this matter, please call:

### Ross Benschoter

,**4**07

572-2465

Name of Contact Person

Area Code & Daytime Telephone Number

ų,

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

# $\boldsymbol{\div}$ STATEMENT OF CHANG $\boldsymbol{\overleftarrow{\bullet}}$ 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 statement of change is submitted for a corporation organized under the laws of the State of	
in order to change its registered office or registered agent, or both, in the State of	Florida.
1. The name of the corporation: Highlands Grace Reformed Church, Inc.	
2. The principal office address: 514 N Pine St. Sebring, FL 33870	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 11/5/1976 Document number: 7372	43
5. The name and street address of the current registered agent and registered office on file v Florida Department of State: (If resigned, enter resigned)	with the
Robert G. Campbell	_
113 Apple Tree Ave	TALL 15
Lake Placid, FI 33852	CRETARY LANG 27 AUG 27
6. The name and street address of the new registered agent (if changed) and /or registered of (if changed):	
Ross Benschoter	_ 58
1561 Lakeview Dr. #941	_
P.O. Box NOT acceptable Sebring, FI 33870	_
The street address of its registered office and the street address of the business office of as changed will be identical.	its registered agent,
Such change was authorized by resolution duly adopted by its board of directors or by ar authorized by the board, or the corporation has been notified in writing of the change.	n officer so
Edward W Sager  Signature of an affice for director  Printed or typed name and to	itle
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 conference of my duties, and I am familiar with and accept the obligation of my position agent. On lift this document is being filed merely to reflect a change in the registered offinereby confirm that the corporation has been notified in writing of this change.	mplete on as registered ice address, I
Signature of Registered Agent Pate	<del></del>
If signing on behalf of an entity:	
Ross Benschoter	
Typed or Printed Name	

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