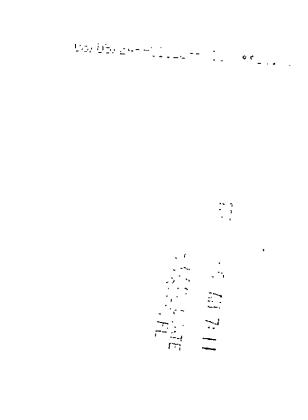
## 739954

(Requestor's Name)				
(Address)				
(Address)				
( loadess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Certificates di Status				
Special Instructions to Filing Officer.				

Office Use Only



200434324732



C8/eld 24

## **COVER LETTER**

TO: Amendment Section Division of Corporations SUBJECT: First Presbyterian Church of Lakeland, Florida Name of Corporation DOCUMENT NUMBER: 739954 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: Andrea Merritt Name of Contact Person That I too you min Charles Firm/Company 175 Lake Hollingsworth Dr Address Lakeland, FL 33801 City/State and Zip Code amerritt@fpclakeland.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Andrea Merritt 863 ) 686-7187 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

Name of Contact Person

Amendment Section Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502, 617.05 ange is submitted for a corporation orga er to change its registered office or regis	inized under the laws of	the State of Florida	
	the corporation: First Presbyterian Church		•	
2. The principal office address: 175 Lake Hollingsworth Drive, Lakeland, FL 33801				
3. The mailing a	address (if different):			
4. Date of incorporation/qualification: 7/1/2024 Document number: 739954				
5. The name and	d street address of the current registered rtment of State: (If resigned, enter resign	agent and registered off	· · · · · · · · · · · · · · · · · · ·	
	Resigned			
			***	
6. The name and (if changed):	I street address of the new registered age	ent (if changed) and /or 1	registered office	
	Andrea Merritt			
	175 Lake Hollingsworth Drive			
	P.O. Bo Lakeland, FL 33801	x NOT acceptable		
The street addre as changed will	ess of its registered office and the street be identical.	address of the business	s office of its registered agent,	
Such change was authorized by th	is authorized by resolution duly adopte the board, or the corporation has been no	d by its board of directo tified in writing of the	ors or by an officer so change.	
(mmk)	e or an officer or director	Ann C. Mo	irshall, VP	
Thereby accept Jurther agree to of my duties, and locument is beir corporation has	the appointment as registered agent an o comply with the provisions of all stat d I am familiar with and accept the obl ng filed merely to reflect a change in th been notified in writing of this change.	d agree to act in this coutes relative to the projection of my position in eregistered office addition.	apacity. per and complete performance as registered agent. Or, if this ress, I hereby confirm that the	
Ordreo Sign	ature of Registered Agent	7/29/2024		
f signing on beh	nalf of an entity:		Date	
Andrea Merritt	•			
Tv	ped or Printed Name			

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

A response