740 235

(Re	equestor's Name)			
(Ad	ldress)	.,		
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



300319214373

10/15/18--01011--013 **35.00

2010 OCT 15 AM II: 20

OCT 1 4 2013

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Ann Norton Sculpture Gardens, Inc.

Name of Corporation

DOCUMENT NUMBER

740235

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:



Name of Contact Person

Ann Norton Sculpture Gardens, Inc.

Firm/Company

2051 S. Flagler Drive

Address

West Palm Beach, FL 33401

City/State and Zip Code

finance@ansg.org

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

For further information concerning this matter, please call:

Donna Pfeiffer

,561

332-5328

Name of Contact Person

Area Code & Davtime 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 ch	provisions of sections 607,0502, 617,05 ange is submitted for a corporation orgo er to change its registered office or regi	anized under the laws of the State of Flo	orida	_
1. The name of	the corporation: Ann Norton Scu	lpture Gardens		
	office address: 2051 S. Flagler [
	West Palm Beac			
3. The mailing	address (if different):			
4. Date of inco	poration/qualification: Sept. 22, 19	977 _{Document number:} 740235		
	d street address of the current registered rtment of State: (If resigned, enter resig	_	the	
	Dr. Roger B. Ward			
	1200 S. Flagler Drive #180	5		
	West Palm Beach, FL 334	01		
6. The name an (if changed):	d street address of the new registered ag	gent (if changed) and /or registered offic	2818 OCT	
	Cynthia Kanai		1 15	
	537 N. Country Club Drive			17. 17. 17.
	Atlantis, FL 33462)T acceptable	AH 11: 28	14. 11.
The street addr	ess of its registered office and the stree be identical.	et address of the business office of its r	egistered ag	ent.
Such change wanthorized by t	as authorized by resolution duly adopte he board, or the corporation has been n	ed by its board of directors or by an of otified in writing of the change.	ficer so	
_ Luston Signat	ire of an officer or director	Susan L. Petersen, Treas	surer	_
I hereby accep I further agree performance of agent. Or, if il hereby confirm	the appointment as registered agent a to comply with the provisions of all sto fmy duties, and I am familiar with and is document is being filed merely to re that the corporation has been notified	and agree to act in this capacity, tutes relative to the proper and compl accept the obligation of my position a flect a change in the registered office of in writing of this change.	ete s registered address, I	
(-yr	thia Kanai	October 2, 2018		
	gnature of Registered Agent	Date		_
If signing on be	chalf of an entity:			
1	Sped or Printed Name			

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