

741575

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

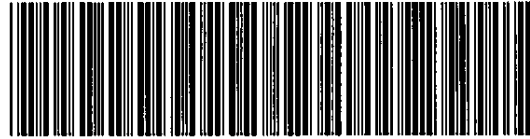
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200082537162

01/18/07--01001--004 \*\*35.00

FILED  
07 JAN 18 PM 2:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ZA chg  
REC, 1/17/07

George P. Langford  
*Attorney at Law*

TAMIAMI CENTER  
3357 TAMIAMI TRAIL NORTH  
NAPLES, FLORIDA 34103-4165

TELEPHONE: (239) 262-2011  
FACSIMILE: (239) 262-0902  
E-MAIL: [LangfordLaw@earthlink.net](mailto:LangfordLaw@earthlink.net)

January 11, 2007

Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Everglades City Club Restaurant & Marina, Inc.

To whom it may concern,

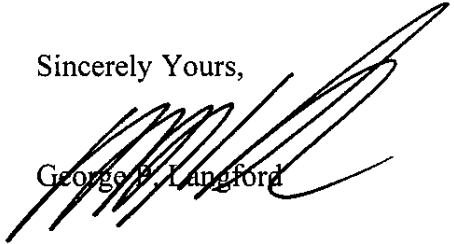
I am sending herewith the following:

- a) Cover Letter concerning Registered Agent; and
- b) Statement of Change of Registered Office or Registered Agent or Both; and
- c) Check in the amount of \$35.00 for Change of Registered Agent filing fee; and
- d) Corporation Reinstatement; and
- e) Check in the amount of \$1,041.25 covering Reinstatement fee and Certificate of Status.

Please return the Certificate of Status to this office.

Thanking you, I am

Sincerely Yours,

  
George P. Langford

enclosures

wpd/corporation/everglades city club/ltr to department of state 1-11-07

REC-11  
07 JUL 17 AM 6:00  
DIVISION OF CORPORATIONS

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Everglades City Club Restaurant & Marina, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** 741575

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:

George P. Langford, Esquire  
(Name of Contact Person)

George P. Langford Attorney at Law  
(Firm/Company)

3357 Tamiami Trail North  
(Address)

Naples, Florida 34103  
(City/State and Zip Code)

For further information concerning this matter, please call:

George P. Langford at ( 239 ) 262-2011  
(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**

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: EVERGLADES CITY CLUB RESTAURANT & MARINA, INC.
2. The principal office address: 200 Collier Blvd., Everglades City, FL 34139
3. The mailing address (if different): P.O. Box 108, Everglades City, FL 34139
4. Date of incorporation/qualification: 02/09/1978 Document number: 741575
5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State:

Joel E. Metts

1607 Lindberg Avenue

Lake Placid, FL 33852-8088

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

George P. Langford, Esquire

3357 Tamiami Trail North

(P.O. Box NOT acceptable)

Naples, FL 34103

FILED  
07 JAN 18 PM 2:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

  
(Signature of an officer or director)

Douglas House, President

(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.*

  
(Signature of Registered Agent)

George P. Langford

If signing on behalf of an entity:

(Typed or Printed Name)

1-11-07  
(Date)

\*\*\* 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 (8/05)