

752538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

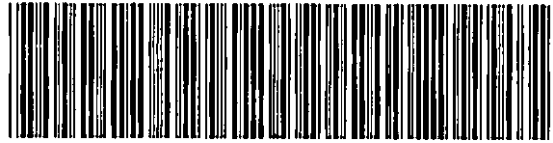
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

R/A 26

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Sarasota Youth Sailing Program, Inc.  
Name of Corporation

DOCUMENT NUMBER: 59-2008905

752538

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:

Mary Trichter

Name of Contact Person

Sarasota Youth Sailing Program, Inc.

Firm/Company

1717 Ken Thompson Parkway

Address

Sarasota, Florida 34236

City/State and Zip Code

sarasotayouthsailing@gmail.com ✓

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

For further information concerning this matter, please call:

Mary Trichter

Name of Contact Person

at ( 941 ) 504-4236

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: Sarasota Youth Sailing, Inc  
2. The principal office address: 1717 Ken Thompson Parkway  
Sarasota, Florida 34236  
3. The mailing address (if different): same

4. Date of incorporation/qualification: 05/19/1980 Document number: 59-2008905 752538

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)

Ross L. Fogleman III

401 N. Cattlemen Road Suite 300

Sarasota, Florida 34232

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

Mary Trichter

1717 Ken Thompson Parkway

P.O. Box NOT acceptable

Sarasota, Florida 34236

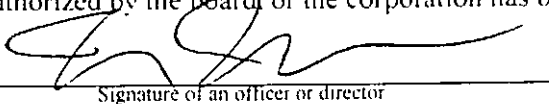
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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Tim Thurman - Treasurer

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

05/01/2019  
Date

If signing on behalf of an entity:

Mary P. Trichter  
Typed or Printed Name

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