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COVER LETTER

Division of Corporations		
SUBJECT: FLORIDA CLOGGING Name of C	G COUNCIL, INC.	
ivano oi c	orporation	
DOCUMENT NUMBER:	757967	
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter	_	
DARLENE	A MELIUS	
Name of Co		
FLORIDA CLOGGII		
Firm/Co	ompany	
4640 COUNTR	Y TRAILS DR	
Add		
POLK CITY	FL, 33868	
City/State an	id Zip Code	
DOLLMEI 16	AAOI COM	
DOLLMEL1@ E-mail address: (to be used for fi	uture annual report notification)	
is man address. (to be used for the	note annual report notification)	
For further information concerning this matter, please c	all:	
DARLENE A MELIUS	at (863) 984-1793	
Name of Contact Person	at (003) 984-1793 Area Code & Daytime Telephone Number	
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Enclosed is a \$35.00 check made payable to the Depart	ment of State.	
Mailing Address: Amendment Section	Street Address:	
	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
	Tallahassee, FL 32301	

TO:

Amendment Section

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: Florida Clogging Council, Inc.
2. The principal office address: 4640 Country Trails Dr, Polk City, FL 33868
3. The mailing address (if different):
4. Date of incorporation/qualification: 05/11/1981 Document number: 757967
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)
Shellye L Schwartz
5048 Lantana Rd, Apt. 5212
Lake Worth FL 33463
Lake Worth FL 33463 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Darlene A Melius
Darlene A Melius
4640 Country Trails Dr
P.O. Box NOT acceptable
Polk City Fl 33868
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.
Deboran 5 Conn FCC Presider Signature of an officer or director Deboran 5 Conn FCC Presider Finited or typed rame 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 Salling
If signing on behalf of an entity:
Typed or Printed Name

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