

762396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

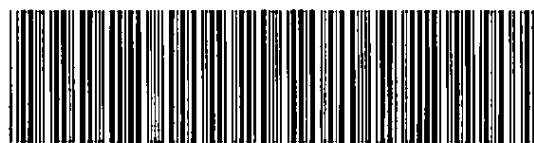
(Document Number)

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

Special Instructions to Filing Officer:

Complete annual form  
or  
RA change form

Office Use Only



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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
20 APR -9 PM 2:35

RA Change

APR 15 2020

D CUSHING

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Sun City Center Security Patrol, Inc.

DOCUMENT NUMBER: 762396FEI/EIN NUMBER59-2169618

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Weaver

(Name of Contact Person)

Sun City Center Security Patrol, Inc.

(Firm/ Company)

1225 North Pebble Beach Blvd.

(Address)

Sun City Center, Florida 33573

(City/ State and Zip Code)

scsecurity2@gmail.com

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

For further information concerning this matter, please call:

John Weaver

813

296-7179

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is  
Enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

FILED  
STATE  
DEPT OF  
CORPORATIONS  
20 APR -9 PM 2:35



2020 APR -9 AM 10:35

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 2, 2020

JOHN WEAVER  
SUN CITY CENTR SECURITY PATROL, INC.  
1225 NORTH PEBBLE BEACH BLVD  
SUN CITY CENTER, FL 33573

SUBJECT: SUN CITY CENTER SECURITY PATROL, INC.  
Ref. Number: 762396

We have received your document for SUN CITY CENTER SECURITY PATROL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must either submit the complete amendment form (all 4 pages) or complete the proper registered agent change form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 620A00007173

**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: Saw City Center Security Patrol, Inc.
2. The principal office address: 1225 N. Pebble Beach Blvd.  
Saw City Center, FL 33573
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: \_\_\_\_\_
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)  
RESIGNED

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

John Weaver  
1225 N. Pebble Beach Blvd.  
P.O. Box NOT acceptable  
Saw City Center, FL 33573

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]  
Signature of an officer or director

FRED FIEDLER, Chief of Patrol  
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.

John Weaver  
Signature of Registered Agent

4-7-2020  
Date

If signing on behalf of an entity:

JOHN WEAVER  
Typed or Printed Name

\*\*\* 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 (04/13)

20 APR -9 PM 2:35  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA