

F07000005624

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

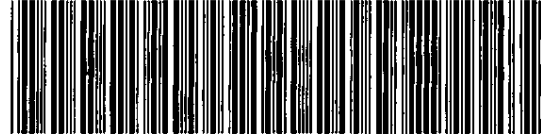
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TALLAHASSEE, FLORIDA

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R.A.

TB

NOV - 2 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Elderhostel, Inc.
Name of Corporation

DOCUMENT NUMBER: F07000005624

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:

Lowell Partridge
Name of Contact Person

Elderhostel, Inc
Firm/Company

11 Avenue de Lafayette
Address

Boston, MA 02111
City/State and Zip Code

Finance@elderhostel.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lowell Partridge at (617) 457-5411
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 20, 2009

LOWELL PARTRIDGE
ELDERHOSTEL, INC.
11 AVENUE DE LAFAYETTE
BOSTON, MA 02111

SUBJECT: ELDERHOSTEL, INC.
Ref. Number: F07000005624

We have received your document for ELDERHOSTEL, 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):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 309A00033471

Ms. Brown

Per our discussion on October 27th

*I've corrected the name printed
in item 6. Please contact me
directly at 617-457-5518 with
additional questions. Thank you.*

*Rachel Hamilton
Sr. Tax & Regulatory Accountant*

**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 Massachusetts in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Elderhostel, Inc.
2. The principal office address: 11 Avenue de Lafayette Boston, MA 02111
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/12/1977 Document number: F07000005624
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)

Corporation Services Company

1201 Hays Street

Tallahassee, Florida 32301

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

Charles C. Boardman, Ed.D.

2086 Gary Ct.

P.O. Box NOT acceptable

Palm Harbor, Florida 34683

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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.

Lowell Partridge
Signature of an officer or director

Lowell Partridge, CFO & Ass't 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.

Charles C. Boardman, Ed.D.
Signature of Registered Agent

10/2/09
Date

If signing on behalf of an entity:

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 (8/05)