

F950000001311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

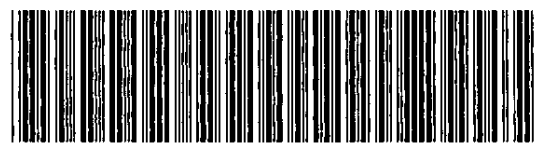
(Business Entity Name)

(Document Number)

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12 AUG 17 PM 3:21  
FEDERAL BUREAU OF INVESTIGATION  
DIVISION OF CONSUMER PROTECTION

R/A/Ro/chg  
@ 8/17/12

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: The Caledonian Foundation USA, Inc.  
Name of Corporation

DOCUMENT NUMBER: F 95000001311 (8)

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:

Correction 8/7/12. Miss Duncan MacDonald,  
Name of Contact Person  
Principal Office: Exec. VP  
104 S. Pineapple Ave. The Caledonian Foundation USA,  
Sarasota FL 34236-5727 Firm/Company Inc.  
Miss Duncan MacDonald PO Box 1242  
Address

Edgartown, MA 02539  
City/State and Zip Code

dm99mv@vineyard.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Miss Duncan MacDonald at (508) 693-3135  
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

July 24, 2012

DUNCAN MACDONALD  
THE CALEDONIAN FOUNDATION  
P.O. BOX 1242  
EDGARTOWN, MA 02539

SUBJECT: THE CALEDONIAN FOUNDATION USA, INC.  
Ref. Number: F95000001311

We have received your document for THE CALEDONIAN FOUNDATION USA, 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):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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.

Irene Albritton  
Regulatory Specialist II

Letter Number: 312A00019531

Dear Ms. Albritton:

Thank you for bringing this error to our attention.

I hope these corrections are sufficient.

Duncan MacDonald

*Duncan MacDonald*  
2012 AUG 17 AM 9:55  
TO AGENCY FOR  
SUFFICIENCY OF FILING

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

1. The name of the corporation: The Caledonian Foundation USA, Inc.

2. The principal office address: PO Box 1242

104 S. Pineapple Ave.

Edgartown, MA 02539

3. The mailing address (if different): (as above)

4. Date of incorporation/qualification: 3/20/1995 Document number: F95000001811(8)

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)

Dr. Robert John Munro (Resigned)

3733 NW 49th Lane

Gainesville, FL 32605

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

Dr. Edward V. Williams

8441 Gardens Circle #7

P.O. Box NOT acceptable

Sarasota, FL 34243

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.

Duncan MacDonald  
Signature of an officer or director

Duncan MacDonald, Exec. VP/  
Printed or typed name and title  
Director

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.

Edward V. Williams  
Signature of Registered Agent

July 10, 2012  
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