

## Florida Department of State

**Division of Corporations Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone : (850) 521-0821 Fax Number : (850)558-1515

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

## **REGISTERED AGENT CHANGE** HUMAN RIGHTS CAMPAIGN FOUNDATION, INC.

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FEB 2 2 2012 T. ROBERTS

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		0502, 607.1508, or 617.1508, Florida Statutes, this ganized under the laws of the State of DC
in or	der to change its registered office or reg	istered agent, or both, in the Stute of Florida.
1. The name of	of the corporation: HUMAN RIGHTS	CAMPAIGN FOUNDATION, INC.
2. The princip	al office address: 1640 Rhode Island	Avenue, NW
	on DC 20036	
3. The mailing	g address (if different):	
4. Date of inco	orporation/qualification: 1/2/1996	Document number: F9600000013
5. The name a		d agent and registered office on file with the
_	CT Corporation System	LEG THE STATE OF T
	1200 South Pine Island Road	22 P
	Plantation FL 33324	The state of the s
6. The name a		gent (if changed) and /or registered office
	Corporation Service Company	
	1201 Hays Street	
	(P.O. Box NOT accept	able)
	Tallahassee, FL 32301	
The street ade as changed w	dress of its registered office and the strail be identical.	eet address of the business office of its registered agent,
Such change authorized by	was authorized by resolution duly adop the board, or the corporation has been	pted by its board of directors or by an officer so notified in writing of the change.
,	Jauren Cathell	Maureen Cathell, Vice President
	nature of an officer or director)	(Printed or typed name and title)
I hereby acce I further agre of my duties, document is t corporation b	ept the appointment as registered agent ie to comply with the provisions of all s and I am familiar with and accept the being filed merely to reflect a cept the in has been notified in writing of this char ation Service Company	and agree to act in this capacity.  Statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this is the registered office address, I hereby confirm that the tige.
•	inserthetiste	2/20/2012
	(Signature of Registered Agent)	(i)ate)
If signing on	behalf of an entity:	
Grace E. Ki	rby, Assistant Vice President	
	(Typed or Printed Name)	
	* * * PIT INC	EDF. 635 AA ± ± ±

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