

J30460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

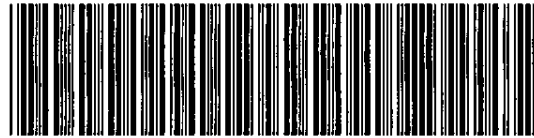
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600296410026

03/10/17--01013--006 **35.00

FILED
2017 MAR 10 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FL 32310

3/13/17

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Regent Project Finance Inc
Name of Corporation

DOCUMENT NUMBER: J30460

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:

Thomas D. Green

Name of Contact Person

Stonegate Bank

Firm/Company

4600 West Kennedy Blvd

Address

Tampa, Florida 33609

City/State and Zip Code

tgreen@stonegatebank.com

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

For further information concerning this matter, please call:

Thomas Doug Green

Name of Contact Person

at (813) 2815131

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

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: Regent Bank Project Finance, Inc.
2. The principal office address: 2205 S. University Drive, Davie, Florida 33324
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 8/25/86 Document number: J30460
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)

Barry Webber

4430 S.W 64th Ave

Davie, FL 33314

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

Thomas D. Green

Stonegate Bank

P.O. Box NOT acceptable

4600 West Kennedy Blvd, Tampa, FL 33609

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.

Neill LeCorgne
Signature of an officer or director

Neill LeCorgne, DP
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.

Thomas D. Green
Signature of Registered Agent

3/3/17
Date

If signing on behalf of an entity:

Thomas D. Green
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 (03/12)

FILED
2017 MAR 10 AM 10:28
CLERK OF STATE
TALLAHASSEE, FLORIDA