## WOQ1410 **ALL SAINTS ANGLICAN CHURCH** P.O. BOX 357744 GAINESVILLE, FL 32635

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S)	& DOCUMENT NUMBER(S),	(if known)
CURPURATION NAME (S)	C DOCOMBAL HOMERIA)	, (11 12110 11 11

ORPORATION NAME(S) & DOCU	4000033799244 -09/01/0001036008	
(Corporation Name)	(Document #) *****35.88 *****35.80	
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(Corporation Name)	(Document #)	
(Corporation Name)	(Document#)	
☐ Walk in ☐ Pick up time _	(Document #)  Certified Copy: 8	
☐ Mail out ☐ Will wait	Photocopy Certificate of Status	
NEW FILINGS	AMENDMENTS	
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other T. LEWIS SEP 1 3 2000	
	Examiner's Initials	

CR2E031(7/97)

## 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, the undersigned corporation organized under the laws of the State of Florida
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.
1. The name of the corporation is: All Saints Anglican Church, Gaines ville, INC.
2. The mailing address of the corporation is: P.O. Box 357744
Gaines.uille, FL 32635
3. Date of incorporation/qualification: 24 Feb, 2000 Document number: No000000 1410
4. The name and address of the current registered agent and office:
WALTER L. CROSRY
3625 NW 119 Terrace
Gainesville, FL 32606 ES 8
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
William E. Ryon, III SE 1 E
5105 NW 62rd Tenace
Gainesville, FL 32606
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.
M. Elocae Moung Selton (Signature of an officer, chairman or vice chairman of the board)  (Date)
M. Elois E Young Sexton-WARDEN (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
WILLIAM E. RYON, III Treasurer  (Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *
CR2E045(7/97)

P.O. Box 6327

TALLAHASSEE, FL 32314

**DIVISION OF CORPORATIONS**