Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 205-0380

From:

Account Name : SHUFFIELD LOWMAN Account Number : I20030000118

Phone : (407)581-9800 Fax Number : (407)581-9801

REGISTERED AGENT CHANGE

EARLY LEARNING COALITION OF LAKE COUNTY, INC.

Certificate of Status	0
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Page Count	02
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9/20/2005 10:00:50 AM

1.

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.

The name of the corporation: EARLY LEARNING COALITION OF LAKE COUNTY, INC.

2.	The principal office address: 1504 South Street Leesburg, FL 34748	
3.	The mailing address (if different):	
4.	Date of incorporation/qualification: 05/07/2000 Document Number: N0000003156	
5.	The name and street address of the current registered agent and registered office on file with the Florida Department of State: Lake County School Readiness Coalition, Inc. 1504 South Street Leesburg, FL 34748	
6.	The name and street address of the new registered agent (if changed) and/or registered office (if changed): Lesha Coffield, Executive Director Early Learning Coalition of Lake County, Inc. 1504 South Street Leesburg, FL 34748	
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.		
(Signa	ture of an officer, chairman or vice chairman of the board) (Print or type 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.		
	9/14/25 Type of Participal Agent)	
	ing on behalf of an entity: (Date)	
(Types	or Printed Name) (Capacity)	
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