## N00000001154

| (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



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12/22/11--01012--015 \*\*35.00



DOR 17

## **COVER LETTER**

| TO:   | Amendme<br>Division o                                  | nt Section<br>f Corporations  |                                     |   |  |
|---|--|---|-------------------------------------|---|--|
| SUBJ  | ECT:   | Youth With A  | Mission - Ja                        | cksonville, Inc   | •  |
| DOC   | UMENT NU   | MBER:   | N00000                              | 007154  |  |
| The e   | nclosed State  | ment of Change of Re  | gistered Office/Ag                  | ent and fee are subm  | nitted for filing.                                 |
| Please  | return all co  | rrespondence concern  | ing this matter to t                | he following:   |  |
|   |  |   | Robert Mark I<br>Name of Contact    | Baxter<br>Person  |  |
|   | Youth With A Mission - Jacksonville, Inc. Firm/Company |   |                                     |   |  |
|   | 117 1st Avenue North                                   |   |                                     |   |  |
| Address   |  |   |                                     |   |  |
| Jacksonville Beach, Florida 32250 City/State and Zip Code |  |   |                                     |   |  |
|   | _  | ma<br>E-mail address: (to   | urkbaxter77@gi<br>be used for futur | mail.com<br>e annual report not   | ification)   |
| For fu  | rther informa  | ation concerning this m   | natter, please call:                |   |  |
|   |  | Mark Baxter   | at                                  | ( 904 )   | 372-0161   |
|   | Nar  | ne of Contact Person  |                                     | Area Code & Day   | 372-0161<br>time Telephone Number                  |
| Enclos  | sed is a \$35.0  | 00 check made payable   | to the Departmen                    | t of State.   |  |
|   |  | Mailing Address<br>Amendment Sec<br>Division of Cor<br>P.O. Box 6327<br>Tallahassee, FL | ction<br>porations                  | Street Addres Amendment S Division of C Clifton Build 2661 Executi Tallahassee, 1 | Section<br>Corporations<br>ing<br>ve Center Circle |

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

| statement of cha                                       | erovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.   |  |  |  |  |  |
|--|---|--|--|--|--|--|
| 1. The name of   | the corporation: Youth With A Mission - Jacksonville, Inc.  |  |  |  |  |  |
| 2. The principal                                       | . The principal office address: 117 1st Avenue North, Jacksonville Beach, Florida 32250   |  |  |  |  |  |
| 3. The mailing a                                       | address (if different):   |  |  |  |  |  |
| 4. Date of incor                                       | poration/qualification: 10/26/2000 Document number: N0000007154   |  |  |  |  |  |
|  | d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)  |  |  |  |  |  |
|  | John R. Crawford  |  |  |  |  |  |
|  | 225 Water Street, Ste 900   |  |  |  |  |  |
|  | Jacksonville, Florida 32202   |  |  |  |  |  |
| 6. The name and (if changed):                          | Robert Mark Baxter  Robert Mark Baxter  |  |  |  |  |  |
|  | Robert Mark Baxter  |  |  |  |  |  |
|  | 117 Ist Avenue North  |  |  |  |  |  |
|  | P.O. Box NOT acceptable  Jacksonville Beach, Florida 32250  |  |  |  |  |  |
|  |   |  |  |  |  |  |
| The street address changed will                        | ess of its registered office and the street address of the business office of its registered agent, l be identical.   |  |  |  |  |  |
| Such change was authorized by the                      | as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.   |  |  |  |  |  |
|  | Robert Mark Baxter, President Printed or typed name and title   |  |  |  |  |  |
| I further agree<br>of my duties, an<br>document is bei | the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change. |  |  |  |  |  |
| _1(X)  |   |  |  |  |  |  |
|  | enathre of Registered Agent Date  Chalf of an entity:   |  |  |  |  |  |
|  | ······· ······ ··· · · · · · · · · ·  |  |  |  |  |  |
| T  | yped or Printed Name  |  |  |  |  |  |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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