

N0000000L7921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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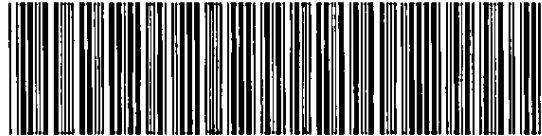
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2018 MAY 31 AM 11:18

JUN 05 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Calvary Chapel, North Pinellas, Inc.
Name of Corporation

DOCUMENT NUMBER: N00000007921

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:

Stephen Cummins
Name of Contact Person

Calvary Chapel, North Pinellas, Inc.
Firm/Company

32676 US Hwy 19 North
Address

Palm Harbor, FL 34684
City/State and Zip Code

~~stephencummins@ccpalmharbor.com~~
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephen Cummins at (727) 786-7969
Name of Contact Person 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

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**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: Calvary Chapel, North Pinellas, Inc.
2. The principal office address: 32676 US Hwy 19 N. Palm Harbor,
FL 34684
3. The mailing address (if different): _____
4. Date of incorporation/qualification: November 27, 2000 Document number: N00000007921
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)

James W. Nelson
4712 Windflower Circle
Tampa, FL 33624 (resigned)

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

Stephen J. Cummins
1945 Fern Ridge Ct.
P.O. Box NOT acceptable
Holmdel, FL 34691

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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.

Brett Robinson
Signature of an officer or director

BRETT ROBINSON PD
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.

Stephen J. Cummins
Signature of Registered Agent

5/24/18
Date

If signing on behalf of an entity:

Typed or Printed Name

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