

NO1000004608

Jordan Baseball
222 Carla Ann Ct
Auburndale, FL
33823

(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



700009696117

01/06/03--01025--009 **35.00

FILED
03 JAN -6 AM 7:24
SECRETARY OF STATE
TALLAHASSEE, FL

RA Change
1/14 T. Lewis

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 : Lakeland Tornadoes Baseball Club, inc
2. The mailing address of the corporation : 222 Carla Ann Ct
Auburndale 71 33823
3. Date of incorporation/qualification: 12/27/02 Document number: N0210000087608
4. The name and address of the current registered agent and registered office:

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

Valerie Griffin
222 Carla Ann Ct
Auburndale, 71 33823

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.

Valerie Griffin

(Signature of an officer/chairman or vice chairman of the board)

12/27/02

(Date)

Valerie Griffin vice chairman

(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.

Valerie Griffin

(Signature of Registered Agent)

12/27/02

(Date)

If signing on behalf of an entity:

Valerie Griffin

(Typed or Printed Name)

(Capacity)

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