

No20000009724

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

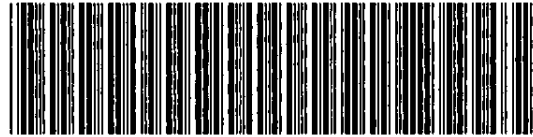
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400240565474

RA
change

10/12/12--01008--019 **35.00

FILED
2012 OCT 12 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOOR
10/12/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Grand Avenue ECDC Housing, Inc.
Name of Corporation

DOCUMENT NUMBER: N02000009724

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:

Helaine Blum, President
Name of Contact Person

Grand Avenue ECDC Housing, Inc.
Firm/Company

3200 W. Colonial Dr.
Address

Orlando, FL 32808
City/State and Zip Code

helaine@grandave.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Helaine Blum at (407) 294-0123
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

**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: Grand Avenue ECDC Housing, Inc.
2. The principal office address: 3200 W. Colonial Dr.
Orlando, FL 32808
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/18/2002 Document number: N02600009724

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)

Joseph A. Divito

4514 Central Ave.

St. Petersburg, FL 33711

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

Helaine Blum, Atty at Law

3200 W. Colonial Dr.

P.O. Box NOT acceptable

Orlando, FL 32808

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.

John M. Blum, President
Signature of an officer or director

Helaine M. Blum, President
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.

John M. Blum
Signature of Registered Agent

10/5/12
Date

If signing on behalf of an entity:

Typed or Printed Name

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