N02566

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
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SECRETARY OF SIGNITATION

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Hosanna Baptist Church Name of Corporation	
DOCUMENT NUMBER: NO3566	
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:	
Ron Jeffords Name of Contact Person	
Hosanna Baptist (hurch	
7800 Ramona Blvd	
Jack sonville, FL 32221 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Roy Seffords at 904 378-14 Area Code & Daytime Telephone Member	
Name of Contact Person Area Code & Daytime Telephone Armbel	ا ا
Enclosed is a \$35.00 check made payable to the Department of State. Mailing Address: Amandment Section Management Section	
Mailing Address: Amendment Section Street Address: Amendment Section	
Amendment Section Amendment Section —— Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 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: Hosanna Baptist Church
1. The name of the corporation: Hosanna Baptist Church 2. The principal office address: 7800 Ramona Blvd Jacksonville, FL 32221
3. The mailing address (if different): P.D. Box 6832 Jacksonville, FL 32236
4. Date of incorporation/qualification: 04/16/1984 Document number: NO2566
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)
Fore, Dorothy P
7800 Ramona Blud West
Jacksonville, FL 32221
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Hector De Jesus Sr.
7800 Ramona Blud P.O. Box NOT acceptable
Jacksonville, FL 32221
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 suthorized by the board, or the corporation has been notified in writing of the change.
Ron Jeffords Row Teffords 3
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.
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)