

N03338

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TBrown 6-24-11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KEEP SANDY CREEK BEAUTIFUL, INC
Name of Corporation

DOCUMENT NUMBER: 1103338

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:

MAUREEN ALLSTOT
Name of Contact Person

KEEP SANDY CREEK BEAUTIFUL, INC
Firm/Company

12143 COUNTRY CLUB DR.
Address

PANAMA CITY FL. 32404
City/State and Zip Code

DIXIEGYPSY @ AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maureen Allstot at (850) 874-2791
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 FL.
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: KEEP SANDY CREEK BEAUTIFUL, INC.
2. The principal office address: 12143 Country Club Dr., Panama City, FL
32404
3. The mailing address (if different): P.O. Box 6634, Panama City, FL 32404
4. Date of incorporation/qualification: 3/18/2008 Document number: NO 3338
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)

FRANCINE VINCENT (RESIGNED)

4003 PAR DRIVE

PANAMA CITY, FL. 32404

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

MAUREEN ALLSTOT

12143 COUNTRY CLUB DR

P.O. Box NOT acceptable

PANAMA CITY, FL. 32404

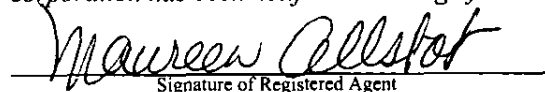
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.


Signature of an officer or director

MARK ANDERSON, 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.


Signature of Registered Agent

June 16, 2011
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

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TALLAHASSEE, FLORIDA