

NO4000003750

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(City/State/Zip/Phone #)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ORLANDO DEAF COMMUNITY CHURCH, INC.
(Name of corporation)

DOCUMENT NUMBER: NO4000003750

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:

ROSEMARY SAMUEL
(Name of person)

ORLANDO DEAF COMMUNITY CHURCH, INC.
(Name of firm/company)

10604 SATINWOOD CIRCLE
(Address)

ORLANDO, FLORIDA 32825
(City/state and zip code)

For further information concerning this matter, please call:

Miss. Rosemary Samuel at (407) 482-4599 T.D.D.
(Name of 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
409 E. Gaines Street
Tallahassee, FL 32399

Division of Corporations
P.O Box 6327
Tallahassee, Florida 32314

Dear Louise Flemming-Jackson
Document Specialist Supervisor

June 9 2004

Hi. This is Rosemary Samuel. I am sorry the misunderstanding.
I had wanted to change the current address of 9821 Carmel Park Drive Orlando, Florida 32817 to a new address of 10604 Satinwood Circle Orlando Florida 32825.

I had written the same address twice I apologize. If there is any more confusion can you please contact me as soon as possible.

Thanks Again,

Rosemary Samuel

E-mail: rosemarysamuell@msn.com
(407)482-4599 TDD



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 27, 2004

Rosemary Samuel
% ORLANDO DEAF COMMUNITY CHURCH, INC.
10604 Satinwood Circle
Orlando, FL 32825

SUBJECT: ORLANDO DEAF COMMUNITY CHURCH, INC.
Ref. Number: N04000003750

We have received your document for ORLANDO DEAF COMMUNITY CHURCH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

I don't know what you are trying to do, please call me before making corrections or returning your document to this office.

Please return a copy of this letter along with your document to ensure proper handling.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6910.

Louise Flemming-Jackson
Document Specialist Supervisor

Letter Number: 504A00037275

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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ORLANDO DEAF COMMUNITY CHURCH, INC.
2. The principal office address: 10604 SATINWOOD CIRCLE
ORLANDO FLORIDA 32825
3. The mailing address (if different): N/A

4. Date of incorporation/qualification: June 7 2004 Document number: NO4000003750

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

9821 CARMEL PARK DRIVE
ORLANDO FLORIDA 32817

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

10604 SATINWOOD CIRCLE
(P.O. Box or personal mailbox NOT acceptable)
ORLANDO FLORIDA 32825

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)

(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.

Rosemary Samuel
(Signature of Registered Agent)

June 7 2004
(Date)

If signing on behalf of an entity:

ROSEMARY SAMUEL
(Typed or Printed Name)

June 7 2004
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS, P.O. BOX 6327 TALLAHASSEE, FL 32314

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