

NO400000 8321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

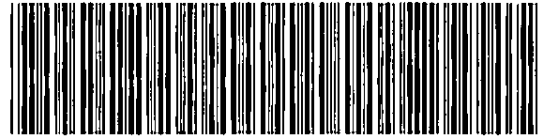
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JUL 20 2019

S. YOUNG

**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: First Congregational Church of Naples, INC  
2. The principal office address: 6225 Autumn Oaks Ln  
Naples Florida 34119  
3. The mailing address (if different): \_\_\_\_\_  
4. Date of incorporation/qualification: August 25, 2004 Document number: NO 4000008321  
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)

Rev Les Wicker  
9570 Transtone Terrace #202  
Naples FL 34120

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

Nikki A. Uri  
12966 White Violet Dr  
Naples FL 34119

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.

Rev Les Wicker, Pastor      Rev Les Wicker Pastor  
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.*

Rubb A Uri      7/10/2009  
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)