N04000009889

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(2000)				
Outfload Coults				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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08/25/20--01005--011 **35.00

2020 AUG 24 AM 9: 57 SECRETARY OF STATE

JQ 10/08/20

COVER LETTER

TO:	Amendment Section Division of Corporations	•					
	CT: The Windsor Charitable Foundation, Income of Corporation	<u>. </u>					
DOCU	MENT NUMBER: <u>N04000009889</u>						
The end	The enclosed Statement of Change of Registered Office/Agent and tee are submitted for filing.						
Please	Please return all correspondence concerning this matter to the following:						
Ţ	4 F - I						
Name c	A. Ford of Contact Person						
	vest, Inc.						
Firm/C	ompany						
$\frac{3125}{\text{Addres}}$	Windsor Boulevard s						
Vere City/St	Beach, FL 32963 ate and Zip Code						
Jane.Ford@windsorflorida.com E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Jane	P. A. Ford Name of Contact Person	at (<u>772</u>) 388-8388 Area Code & Daytime Telephone Number					
Enclose	ed is a \$35.00 check made payable to the Depa	artment of State.					
	Mailing Address: Amendment Section	Street Address:					
	Amendment Section Division of Corporations	Amendment Section Division of Corporations					
	P.O. Box 6327	The Centre of Tallahassee					
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

CR2E045 (04/E3)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporati	, 617.0502, 607.1508, or 617.1508, Florida Station organized under the laws of the State of \pm or registered agent, or both, in the State of Fla	<u>lorida</u>	HS	_
1. The name of t	he corporation: <u>The Windso</u>	or Charitable Foundation, Inc.			
2. The principal	office address: 3125 Windso	or Blvd., Vero Beach, FL 32963			_
3. The mailing a	ddress (if different):				_
4. Date of incorporation/qualification: 10/19/2004 Document number: N04000009889					
	street address of the current returnent of State: (If resigned, ent	gistered agent and registered office on file with er resigned)	h the		
	Jerome D. Quinn, Esqu	ire (RESIGNED 8/15/2020)			
	3111 Cardinal Drive		63 13	207	
	Vero Beach, FL 32963		TARE I	020 AUG	ered j
6. The name and (if changed):	street address of the new regist	tered agent (if changed) and /or registered offic	TARY DI AHASS	G 24 AM	G 33
	Bruce Barkett, Esquire	<u>;</u>	EST EST	9.	Ę.,
	756 Beachland Boulve		产品	57	
	Vero Beach, FL 32963	P.O. Box NOT acceptable			
The street addre	ss of its registered office and t	he street address of the business office of its	register	ed ager	nt.
Such change wa authorized by th	s authorized by resolution dul- e board, or the corporation has	y adopted by its board of directors or by an o s been notified in writing of the change.	officer so)	
Signatur	e of an officer or diffector	Jane A. Ford. Vice Presider Printed or typed name and title	at		_
I further agree t of my duties, an document is bei	the appointment as registered o comply with the provisions of d I am familiar with and accep no filed merely to reflect a cha been notified in writing of thi	agent and agree to act in this capacity. If all statutes relative to the proper and composition as registered Inge in the registered office address, I hereby Is change.	olete per, agent. (confirm	formar Or, if ti 1 that t	ice his he
Dill	e de la	8/13/2020			
Sign	nature of Registered Agent	Date			_
If signing on bel	half of an entity:				
Ty	ped or Printed Name	_			

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