

No 6000001371

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

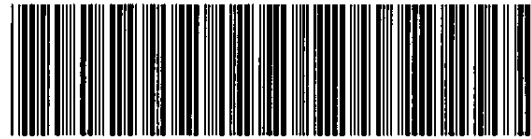
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Amend

04/18/08--01040--020 **43.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 MAY 14 AM 11:25

FILED

ADR
5/15/08

**00789, 00524, 00672*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DeSoto County Homeless Coalition, Inc.

DOCUMENT NUMBER: N06000001371

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Valerie Gilchrist, President

(Name of Contact Person)

DeSoto County Homeless Coalition, Inc.

(Firm/ Company)

P. O. Box 271

(Address)

Arcadia, FL 34265

(City/ State and Zip Code)

For further information concerning this matter, please call:

Valerie Gilchrist, President

(Name of Contact Person)

at (863) 244-8734

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 23, 2008

Valerie Gilchrist, President
DeSoto County Homeless Coalition, Inc.
P.O. Box 271
Arcadia, FL 34265

SUBJECT: DESOTO COUNTY HOMELESS COALITION, INC.
Ref. Number: N06000001371

We have received your document for DESOTO COUNTY HOMELESS COALITION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please sign the second page of the document in the space provided.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 108A00024550

5/12/08
Please see
attached
as requested.
Thanks
Valerie
Gilchrist

RECEIVED
2008 MAY 14 AM 8:00
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**Articles of Amendment
to
Articles of Incorporation
of**

DeSoto County Homeless Coalition, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

N06000001371

(Document number of corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Article VII - Officers - AMENDED

Valerie Gilchrist, President, 1277 SE First Avenue, Arcadia, FL 34266,

Nancy Jo Vaughn, Vice President, 830 N. Johnson Avenue, Arcadia, FL 34266,

Carolyn Thomas, Treasurer, P. O. Box 802, Arcadia, FL 34265,

Janice Mares, Secretary, 208 East Cypress Street, Arcadia, FL 34266,

Pastor Walter T. Branch, Director, 403 E. Pine Street, Arcadia, FL 34266,

Rev. Theodore Hanus, Director, 722 W. Whidden Street, Arcadia, FL 34266,

Eliazar Mares, Director, 3096 SE Creekwood, Arcadia, FL 34266

Penny Kurtz, Director, 34 S. Baldwin Avenue, Arcadia, FL 34266

Lois Wight, Director, P. O. Box 295, Fort Ogden, FL 34267,

Stephen Weeks, Director, P. O. Drawer 351, Arcadia, FL 34265,

Samuel Morgan, Director, 3048 SE Brown Road, Arcadia, FL 34266,

(Attach additional pages if necessary)

(continued)

FILED
2000 MAY 14 AM 11:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

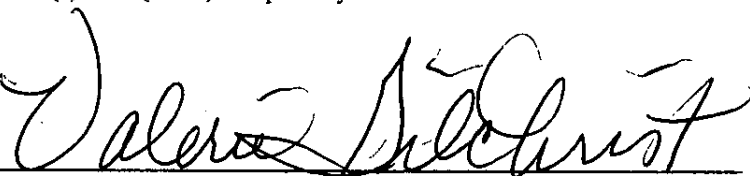
The date of adoption of the amendment(s) was: 4-04-08

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature



(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Valerie Gilchrist

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35