

NO70000001391

(Requestor's Name)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

R.A.

TBrawn 12-28-11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PBR FORCES VETERANS ASSOCIATION, INC.  
Name of Corporation

**DOCUMENT NUMBER:** N07000001391

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:

Bruce D. Myers  
Name of Contact Person

PBR Forces Veterans Association, Inc.  
Firm/Company

693 Evangeline Rd  
Address

Cincinnati, OH 45240  
City/State and Zip Code

bruishous@cinci.rr.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bruce D. Myers at ( 513 ) 532-9863  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 13, 2011

BRUSE D MYERS  
PBR FORCES VETERANS ACCOCIATION, INC.  
693 EVANGELINE RD  
CINCINNATI, OH 45240

SUBJECT: PBR FORCES VETERANS ASSOCIATION, INC.  
Ref. Number: N07000001391

We have received your document for PBR FORCES VETERANS ASSOCIATION, 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):

The registered agent must sign accepting the designation.

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) 245-6925.

Teresa Brown  
Regulatory Specialist II

Letter Number: 911A00027834

**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: PBR FORCES VETERANS ASSOCIATION, INC.
2. The principal office address: 693 Evangeline Rd, Cincinnati, OH 45240-
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: February 8, 2007 Document number: N07000001391
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)

Bruce C. Lindsay, Jr.

6097 Davon Street

Jacksonville, FL 32244-3178

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

Lee R. Wahler

14015 Spanish Point Dr.

P.O. Box NOT acceptable

Jacksonville, FL 32225-2019

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 DEC 27 AM 11:42

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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

Bruce D. Myers - 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

December 6, 2011

Date

If signing on behalf of an entity:

Lee R. Wahler

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 (8/05)