

NO80000009516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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000184054490

Amend

000184054490
09/10/10--01032--022 **35.00

FILED
2010 SEP 22 AM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OK
9/22/10

*00789, 00324, 00671

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Flagler/Palm Coast Civic Association

DOCUMENT NUMBER: N08000009516

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

Please return all correspondence concerning this matter to the following:

Ron DeCosta

(Name of Contact Person)

Flagler/Palm Coast Civic Association

(Firm/ Company)

55 Bayside Drive

(Address)

Palm Coast Florida, 32137

(City/ State and Zip Code)

twf905@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ron DeCosta

(Name of Contact Person)

at (

386

) 446-7833

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$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

September 14, 2010

Ron DeCosta
Flagler/Palm Coast Civic Association
55 Bayside Drive
Palm Coast, FL 32137

SUBJECT: FLAGLER/PALM COAST CIVIC ASSOCIATION, INC.
Ref. Number: N08000009516

We have received your document for FLAGLER/PALM COAST CIVIC 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):

Please sign the amendment form as the treasurer in the space provided at the bottom of page 3.

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: 010A00021864

RECEIVED
10 SEP 22 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation

FILED

2010 SEP 22 AM 12:43

Flagler/Palm Coast Civic Association
(Name of Corporation as currently filed with the Florida Dept. of State)

N08000009516

(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:

A. If amending name, enter the new name of the corporation:

Same as above

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Ron DeCosta

New Registered Office Address:

55 Bayside Drive

(Florida street address)

Palm Coast

(City)

Florida 32137

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PD</u>	<u>Tim O'Donnell</u>	<u>8 Karanda Pl</u> <u>Palm Coast Fl. 32137</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VP</u>	<u>Pam Richardson</u>	<u>69 Putter Dr. Palm Coast Fl.</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Sec</u>	<u>Memory Hopkins</u>	<u>18 Ryecroft Ln.</u> <u>Palm Coast Fl. 32164</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

The date of each amendment(s) adoption: August 12th. 2010

Effective date if applicable: August 12th. 2010 (date of adoption is required)

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

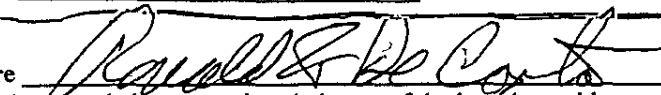
(CHECK ONE)

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated September 6th. 2010

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)

Ron DeCosta

(Typed or printed name of person signing)

Treasurer

(Title of person signing)

