N08000010862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

800162486038

12/02/09--01010--011 **35.00

RA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 DEC -2 AM 11:57

Roberts DEC 07 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The ConGaloosh Society, Inc.
Name of Corporation

DOCUMENT NUMBER: _____

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:

Debra S. Conn ~~Debbie Conn~~
Name of Contact Person

The ConGaloosh Society, Inc.
Firm/Company

861 San Pedro Court
Address

Kissimmee, FL 34758
City/State and Zip Code

congaloosh@att.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert F Croskery, Esq. at (813) 244-5580
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

CR2E045 (8/05)

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: The ConGaloosh Society, Inc.
2. The principal office address: 861 San Pedro Court
   Kissimmee FL 34758
3. The mailing address (if different):
4. Date of incorporation/qualification: Dec 1, 2008 Document number: N08000010862
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)

   Robert F. Croskery

   8819 Bay Pointe E201

   Tampa, FL 33615

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 DEC -2 AM 11:57

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

   ~~Debbie Conn~~ Debra S. Conn

   861 San Pedro Court
   P.O. Box NOT acceptable

   Kissimmee, FL 34758

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.

Robert F. Croskery
Signature of an officer or director

Robert F. Croskery, Chairman of the Board
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.

Debra S. Conn
Signature of Registered Agent

11/21/2009
Date

If signing on behalf of an entity: Debra S. Conn, Treasurer, the ConGaloosh Society, Inc

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)