

NI 6000003830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

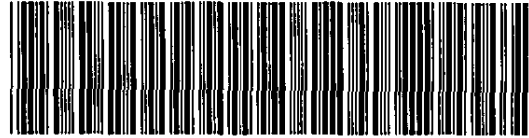
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COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Gulf County Domestic Violence Task Force, Inc.  
Name of Corporation

DOCUMENT NUMBER: N1000000 3830

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:

Carol Bonanno

Name of Contact Person

Gulf County Domestic Violence Task Force, Inc.

Firm/Company

1000 Cecil G. Costic Blvd Room 136

Address

Port St. Joe, FL 32456

City/State and Zip Code

caroleena.bonanno@a gmail.com

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

For further information concerning this matter, please call:

Carol Bonanno

Name of Contact Person

at ( 850 ) 527-2399

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

November 29, 2016

CAROL BONANNO  
P.O. BOX 13423  
MEXICO BEACH, FL 32410

SUBJECT: GULF COUNTY DOMESTIC VIOLENCE TASK FORCE, INC  
Ref. Number: N10000003830

We have received your document for GULF COUNTY DOMESTIC VIOLENCE TASK FORCE, INC and your check(s) totaling \$110.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Carol Mustain  
Regulatory Specialist II

Letter Number: 216A00025414

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: Gulf County Domestic Violence Task Force, Inc.  
2. The principal office address: 1000 Cecil G. Costin Blvd Room 136  
Port St. Joe, Florida 32456  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 3/9/2012 Document number: N10000003830

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)

Gulf County Domestic Violence Task Force, Inc.  
1000 Cecil G. Costin Blvd. Room 136  
Port St. Joe, Florida 32456

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

NEW Registered Office Address:

720 Fortner Ave

Mexico Beach

FL 32456

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.

Pamela G. Martin  
Signature of an officer or director

Pamela G. Martin Board of Directors  
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.

Carol Bonanno  
Signature of Registered Agent

1-9-2017  
Date

I signing on behalf of an entity:

Pamela G. Martin for Carol Bonanno  
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 (03/12)

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