

N12000001452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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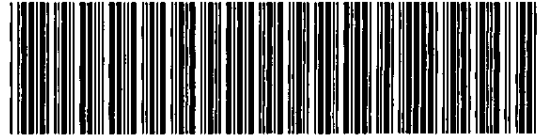
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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REV. ROBERT L. COLEMAN  
PASTOR

## Goodwill Presbyterian Church

606 NORTH 29TH STREET • P. O. Box 1537  
FORT PIERCE, FLORIDA 34954  
CHURCH: (772) 466-9570 • RES.: (772) 464-5594  
FAX: (772) 466-8208

Goodwill Presbyterian Church

EILEAN CLARK  
CLERK OF SESSION

### STEP

### Tutorial Program

*This need to be taken care of immediately.  
We are applying a grant and this is a requirement.  
I applied for this on February 7, 2012. I  
Need by 3/2/12.*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 5, 2012

MRS. Verna Hunter  
STUDENT TUTORIAL AND ENRICHMENT PROGRAM  
606 NORTH 29TH STREET  
FT. PIERCE, FL 34954

SUBJECT: STUDENT TUTORIAL AND ENRICHMENT PROGRAM CORP  
Ref. Number: N12000001452

We have received your document for STUDENT TUTORIAL AND ENRICHMENT PROGRAM CORP, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

To change the registered agent or registered office, or both, the enclosed form should be completed and returned to this office with a filing fee of \$35.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Karen Gibson  
Document Specialist Supervisor

Letter Number: 712A00008443

RECEIVED  
12 MAR 19 AM 9:48 20 AM 10:04  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Student Tutorial AND ENRICHMENT Program Corp  
Name of Corporation

**DOCUMENT NUMBER:** N12 000001452

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:

Mrs. Verna Hunter  
Name of Contact Person

Student Tutorial AND ENRICHMENT Program Corp  
Firm/Company

606 North 29th Street  
Address

Fort Pierce, Florida 34954  
City/State and Zip Code

~~Vernahunter@yahoo.com~~  
E-mail address: (to be used for future annual report notification)  
Vernahunter@yahoo.com

For further information concerning this matter, please call:

Mrs. Verna Hunter at (772) 464-5197  
Name of Contact Person Area Code & Daytime Telephone Number  
772-332 6788 cell phone

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

**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 \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Student Tutorial AND ENRICHMENT Program CORP.  
2. The principal office address: 606 North 29th Street  
Fort Pierce, FL 34954  
3. The mailing address (if different): SAME AS ABOVE

4. Date of incorporation/qualification: Feb 8, 2012 Document number: N 12000001452

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)

Florida Incorporator  
619 Cattleman Road  
Suite 011 Sarasota, FL 34232

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

Mrs. Verna Hunter  
1691 Timberlake Dr  
P.O. Box NOT acceptable  
FT. PIERCE FL 34947

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TALLAHASSEE, FLORIDA

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.

Em Stewart  
Signature of an officer or director

ENA Stewart  
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.

Verna J. Hunter  
Signature of Registered Agent

Feb 27, 2012  
Date

If signing on behalf of an entity:

VERNA J. Hunter  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*