

N14693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

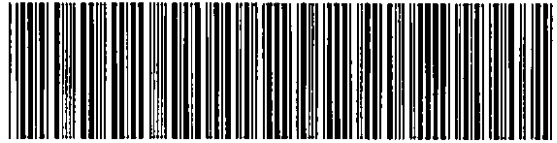
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Spoke to Connie Sherrill
to confirm charges on
5/7/20 to the Amendment
form.

ST NO \$

Office Use Only



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04/30/20--01003--001 **35.00

S TAYLOR
MAY 07 2020

2020 MAY -7 PM 2:21
HALL COUNTY, FL

Handwritten signature

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Lake Clinch Airport Association 2020-05-20 10:54

DOCUMENT NUMBER: N14693

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

Please return all correspondence concerning this matter to the following:

John B. Fogg Jr
(Name of Contact Person)

N/A
(Firm/ Company)

234 Airport Road,
(Address)

Frostproof, FL 33843
(City/ State and Zip Code)

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

For further information concerning this matter, please call:

John Fogg Jr at 786-367-3553
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

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

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 APR 20 9:46

April 20, 2020

JOHN B. FOGG JR
234 AIRPORT RD
FROST PROOF, FL 33843

SUBJECT: LAKE CLINCH AIRPARK ASSOCIATION, INC.
Ref. Number: N14693

We have received your document for LAKE CLINCH AIRPARK ASSOCIATION, INC., 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.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The date of adoption of each amendment must be included in the document.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

Please print the name of the entity at the top of page one in the space provided.

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.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 720A00008226

Articles of Amendment
to
Articles of Incorporation
of

Lake Clinch Airport Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N14693

(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:

N/A

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)

John B. Fogg Jr.

234 Airport Road

Frostproof, FL 33843

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

234 Airport Road

Frostproof FL 33843

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:

John B. Fogg Jr.

234 Airport Road

(Florida street address)

New Registered Office Address:

Frostproof

(City)

Florida

33843

(Zip Code)

2020 MAY -7 PM 2:21

FILED

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.

John B. Fogg Jr.

(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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|------------|-------------------------|---|
| 1) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add

<input type="checkbox"/> Remove | <u>P</u> | <u>John B. Fogg Jr.</u> | <u>234 Airport Road</u>
<u>Footproof, FL 33843</u> |
| 2) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add

<input type="checkbox"/> Remove | <u>V</u> | <u>Lynn Nelson</u> | <u>1851 C.R. 630 mi</u>
<u>Footproof, FL 33843</u> |
| 3) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>T/S</u> | <u>Connie Sherrill</u> | <u>364 Airport Rd</u>
<u>Footproof, FL 33843</u> |
| 4) <input type="checkbox"/> Change
<input type="checkbox"/> Add

<input checked="" type="checkbox"/> Remove | <u>ST</u> | <u>Jack Madden</u> | |
| 5) <input type="checkbox"/> Change
<input type="checkbox"/> Add

<input checked="" type="checkbox"/> Remove | <u>P</u> | <u>Roger Caldwell</u> | |
| 6) <input type="checkbox"/> Change
<input 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)

NIA

- ☐ 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

April 26, 2020

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)

John B. Fogg Jr.

(Typed or printed name of person signing)

President

(Title of person signing)