

N15 00000 7540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

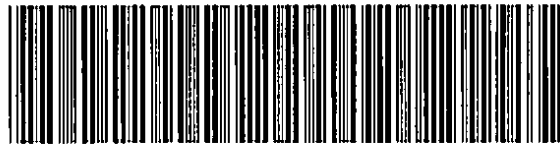
(Business Entity Name)

(Document Number)

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I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PALM HARBOR NEWCOMERS CLUB, INC.

DOCUMENT NUMBER: N15000007540

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

Please return all correspondence concerning this matter to the following:

RITA YEZZI

(Name of Contact Person)

(Firm/ Company)

531 SPRING LAKE CIRCLE

(Address)

TARPON SPRINGS, FL 34688

(City/ State and Zip Code)

ryezzi@bellsouth.net

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

For further information concerning this matter, please call:

RITA YEZZI

(Name of Contact Person)

at

904-305-8398

(Area Code) (Daytime Telephone Number)

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

- | | | | |
|---|--|---|--|
| <input checked="" 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

01
PALM HARBOR NEWCOMERS CLUB, INC. 2010
(Name of Corporation as currently filed with the Florida Dept. of State)

File 3:46

Rola Kozzi
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:

☒ Change
☒ Remove
☒ Add

PT John Doe
V Mike Jones
SV Sally Smith

M = MEMBERSHIP
FA = FINANCIAL ADVISOR

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|-----------|--------------------------|---|
| 1) <input checked="" type="checkbox"/> Change
___ Add
___ Remove | <u>P</u> | <u>RITA YEZZI</u> | <u>531 SPRING LAKE CIRCLE</u>
<u>TARPON SPRINGS, FL 34688</u> |
| 2) <input checked="" type="checkbox"/> Change
___ Add
___ Remove | <u>T</u> | <u>LINDA SANFORD</u> | <u>9609 GRETA GREEN DR</u>
<u>TAMPA, FL 33626</u> |
| 3) <input checked="" type="checkbox"/> Change
___ Add
___ Remove | <u>M</u> | <u>ROSAN DALEY</u> | <u>260 PINEWINDS</u>
<u>OLDSMAR, FL 34677</u> |
| 4) ___ Change
___ Add
<input checked="" type="checkbox"/> Remove | <u>P</u> | <u>CINDY BRIDGEWATER</u> | <u>4039 SALEM SQUARE CIR</u>
<u>CALM HARBOR, FL 34685</u> |
| 5) <input checked="" type="checkbox"/> Change
___ Add
___ Remove | <u>FA</u> | <u>BARBARA HUTH</u> | <u>1871 PINE RIDGE WAY W</u>
<u>W-61</u>
<u>PALM HARBOR, FL 34684</u> |
| 6) ___ Change
___ Add
<input checked="" type="checkbox"/> Remove | <u>FA</u> | <u>DEB ECKENROTH</u> | <u>1871 PINE RIDGE WAY W</u>
<u>#41</u>
<u>PALM HARBOR, FL 34684</u> |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

~~PLEASE SEE ATTACHED EDITED FORM FOR PREVIOUS SUBMISSION~~
WE CURRENTLY HAVE 2 VACANT POSITIONS:
(P Elect Programs and 1ST VP-TRIPS)

Lined area for text entry.

The date of each amendment(s) adoption: 7-31-20, if other than the date this document was signed.

Effective date if applicable: 7-31-20
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

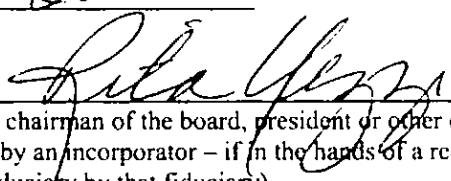
Adoption of Amendment(s) (CHECK ONE)

☒ 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 8-17-20

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)

RITA YEZZI

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)