

N15000008581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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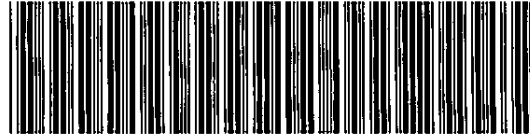
(Business Entity Name)

(Document Number)

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STATE OF CALIFORNIA  
DIVISION OF CORPORATIONS

JUL 20 2016

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** City Reach Church - Gulf Breeze, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** n 1500000 8581

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:

Lisa L. Shaffer

Name of Contact Person

City Reach Network, Inc

Firm/Company

8000 Brooktree Rd, Ste 300

Address

Wexford PA 15090

City/State and Zip Code

lshaffer@cityreachnetwork.org

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

For further information concerning this matter, please call:

Lisa L. Shaffer

Name of Contact Person

at ( 724 ) 719-2934

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

**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: City Reach Church - Gulf Breeze, Inc  
2. The principal office address: 301 Nightingale Lane  
Gulf Breeze, FL 32561  
3. The mailing address (if different): 8000 Brooktree Road, Suite 300  
Weyford PA 15090

4. Date of incorporation/qualification: 9/8/2015 Document number: n 15000008581

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)

Kyle Jacob Jernigan  
3311 Gulf Breeze Pkwy, Ste 352  
Gulf Breeze, FL 32561

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

Kyle Jacob Jernigan  
301 Nightingale Lane  
P.O. Box NOT acceptable  
Gulf Breeze, FL 32561

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DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE

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.

Brian M Bolt  
Signature of an officer or director

Brian Bolt, President  
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.*

Kyle J  
Signature of Registered Agent

6/24/16  
Date

If signing on behalf of an entity:

Kyle J. Jernigan  
Typed or Printed Name

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