

N15 0000 11121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

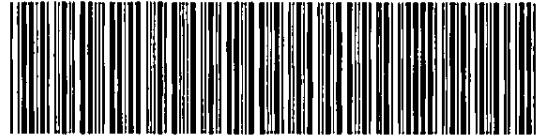
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: North Side Congregation of Jehovah's Witnesses Fort Walton Beach, FL Inc
Name of Corporation

DOCUMENT NUMBER: N15000011121

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:

Glenn E Rector

Name of Contact Person
Secretary - North Side Congregation

Firm/Company
72 Waynel Circle SE

Address
Fort Walton Beach

City/State and Zip Code
Florida 32548

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

For further information concerning this matter, please call:

Glenn Rector at (850) 368-7543
Name of Contact Person 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: North Side Congregation of Jehovah's Witnesses Fort Walton Beach, FL, Inc
2. The principal office address: 216 Jonquil Avenue Fort Walton Beach, FL 32548

3. The mailing address (if different): 72 Waynel Circle SE Fort Walton Beach, FL 32548

4. Date of incorporation/qualification: 11/09/2015 Document number: N1500001121

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)

WOODS, KELLY L
547 SCHNEIDER DR., UNIT B
FORT WALTON BEACH, FL 32547

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

Glenn E Rector

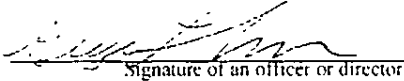
72 Waynel Circle SE

P.O. Box NOT acceptable

Fort Walton Beach, FL 32548

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

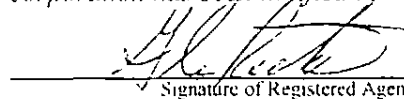
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

George Flores

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.


Signature of Registered Agent

10/17/2020
Date

If signing on behalf of an entity:

GLENN RECTOR
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 (04/13)