

N15231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

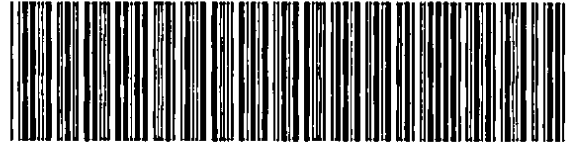
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DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Port Orange Historical Trust, Inc.
Name of Corporation

DOCUMENT NUMBER: N15231

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:

Debbie Gills

Name of Contact Person
Port Orange Historical Trust

Firm/Company
POB 291156

Address
Port Orange, FL 32129

City/State and Zip Code
ncp6101@yahoo.com

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

For further information concerning this matter, please call:

Debbie Gillis at (386) 341-7728
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: Port Orange Historical Trust, Inc.
2. The principal office address: 740 Commonwealth Boulevard, Port Orange, FL 32129

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1986 Document number: N15231

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)

Glenda Coursen

181 Westwood Drive

Daytona Beach, FL 32119

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

Debbie Gillis

729 Herbert Street

P.O. Box NOT acceptable

Port Orange, FL 32129

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.

Drew Karlan
Signature of an officer or director

Drew Karlan, Director

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.

Adi Perkins
Signature of Registered Agent

April 23, 2022

Date

If signing on behalf of an entity:

Deborah Perkins
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)

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DIVISION OF CORPORATIONS
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