

N16 000000 3174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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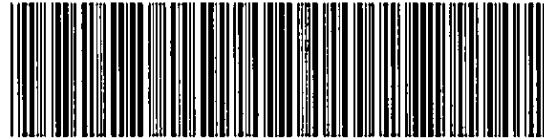
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: New Horizons Band of Gulfport, Inc.
Name of Corporation

DOCUMENT NUMBER: N16000003174

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:

Jo Ann VanVooheries

Name of Contact Person

New Horizons Band of Gulfport, Inc.

Firm/Company

1517 60th Street South

Address

Gulfport, Florida 33707

City/State and Zip Code

jovan2002@aol.com

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

For further information concerning this matter, please call:

Jo Ann VanVooheries

Name of Contact Person

at (727

) 345-0285

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: New Horizons Band of Gulfport, Inc.
2. The principal office address: 1517 60th Street South, Gulfport, FLorida 33707
3. The mailing address (if different): _____
4. Date of incorporation/qualification: March 16, 2016 Document number: N16000003174
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)

Joseph Murphy

1119 Venetian Harbor Dr NE

St. Petersburg, FLorida 33702

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

Jo Ann VanVooheries

1517 60th Street South

P.O. Box NOT acceptable

Gulfport, Florida 33707

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DIVISION OF CORPORATIONS
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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.

Michael Wilson
Signature of an officer or director

Michael Wilson
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.

Jo Ann VanVooheries
Signature of Registered Agent

February 18, 2020
Date

If signing on behalf of an entity:

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)