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COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: Foxwood Christian Fellowship, Inc.

Name of Corporation

N16000011312 DOCUMENT NUMBER:

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:

Daniel Folan
Name of Contact Person
N16000011312 FOXWOOD CHRISTIAN Fellowstlip, INC
Firm/Company
1606 Bassett Dr
Address
Lakeland, FL 33810
City/State and Zip Code
danfolan826@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James A. Stroup

Name of Contact Person

at (706)499-1991 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

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1. The name of the corporation:	Foxwood Christian	Fellowship, Inc
· · · · · · · -		

2. The principal office address: 4700 Foxwood Blvd, Lakeland, FL 33810

- 3. The mailing address (if different): 1606 Bassett Dr., Lakeland, FL 33810
- 4. Date of incorporation/qualification: 01/01/2017 Document number: N16000011312
- 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)

James A. Stroup (resigned) 1605 Bassett Dr

Lakeland, FL 33810

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

Daniel Folan

1606 Bassett Dr

P.O. Box_NOT acceptable

Lakeland, FL 33810

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, of the corporation has been notified in writing of the change.

4 amoffice h director

James A. Stroup

Printed or typed name and title

Date

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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

July 22, 2018

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 CR2E(45 (03/12)