

# NI7000004255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

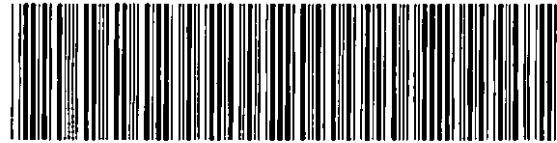
(Document Number)

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OCT 27 2023

10/16/23--01012--016 \*\*35.00

2023 OCT 16 PM 2:53

**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: Naples Chapter of the Florida Society of the Sons of the American Revolution, Inc.

2. The principal office address: 6170 Cypress Hollow Way, Naples Florida 34109

3. The mailing address (if different): 2316 Pine Ridge Road #359, Naples Florida 34109

4. Date of incorporation/qualification: 2017 Document number: N17000004256

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)

(resigned ) Leonard Crame

771 29th Street SW, Naples FL 34117

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

Anthony J. Meerpohl

6170 Cypress Hollow way

P.O. Box NOT acceptable

Npales Florida 34109

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

Anthony J Meerpohl, Treasurer, Board of Directors

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

10/09/2023

Date

If signing on behalf of an entity:

Naples Chapter of the Florida Society of the Sons of t

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)

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Naples Chapter of the Florida Society of the Sons of the American Revolution, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N17000004255

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:

Anthony J. Meerpohl

Name of Contact Person

Naples Chapter of the Florida Society of the Sons of the American Revolution

Firm/Company

6170 Cypress Hollow Way

Address

Naples Florida 34109

City/State and Zip Code

jmeerpohl@comcast.net

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

For further information concerning this matter, please call:

Anthony J. Meerpohl

Name of Contact Person

at (239) 315-0227

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