

N21691

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

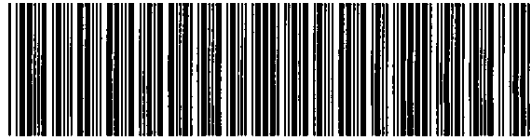
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900268971909

02/02/15--01032--006 \*\*35.00

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 FEB -2 PM 4:01

FEB 05 2015  
T. CARTER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** IRISH AMERICAN CLUB OF CHARLOTTE  
Name of Corporation COUNTY

**DOCUMENT NUMBER:** N21691

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:

DONNALEE A. DECKER  
Name of Contact Person

IRISH AMERICAN CLUB OF CHARLOTTE  
Firm/Company COUNTY

P.O. Box 494625  
Address

PORT CHARLOTTE, FLORIDA 33949  
City/State and Zip Code

IAC OF CC @ VAHDO . COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DONNA LEE A. DECKER at (941) 457-1101  
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  
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: IRISH AMERICAN CLUB OF CHARLOTTE COUNTY  
2. The principal office address: \_\_\_\_\_

3. The mailing address (if different): P.O. Box 494625  
PORT CHARLOTTE, FL. 33949

4. Date of incorporation/qualification: 07/28/1987 Document number: N21691

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 CURRIER  
23189 GOLD COAST AVE.  
Punta Gorda 33980

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

DONNA LEE A. DECKER  
2300 AARON ST. Unit 104  
P.O. Box NOT acceptable  
PORT CHARLOTTE, FL. 33952

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 FEB -2 PM 4:01

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.

Donna Lee A. Decker  
Signature of an officer or director

DONNA LEE A. DECKER (PRES)  
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.*

Donna Lee A. Decker  
Signature of Registered Agent

1/25/15  
Date

If signing on behalf of an entity:

DONNA LEE A. DECKER  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*