N22317

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	: #)
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: First Baptist Church Lake Alfred			
Name of Corporation			
DOCUMENT NUMBER: N22317			
The enclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning thi	s matter to the following:		
Sheilan Runnels			
Name of Contact Person			
First Baptist Church Lake Alfred			
Firm/Company			
280 E Pierce St			
Address			
Lake Alfred, FL 33850			
City/State and Zip Code			
tbclaoffice@gmail.com			
E-mail address: (to be used for future annua	nl report notification)		
For further information concerning this matter,	please call:		
Sheilan Runnels	at (863) 956-1477		
Name of Contact Person	at (863) 956-1477 Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the	Department of State.		
Mailing Address: Amendment Section	Street Address: Amendment Section		
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

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

statement of change is submitted	I for a corporation organ	2, 607.1508, or 617.1508. Florida Stati ized under the laws of the State of ^{Flor} ired agent, or both, in the State of Flor	ida
1. The name of the corporation:	First Baptist Church Lake	Alfred	
2. The principal office address:	280 E Pierce St., Lake Alfi	red, FL 33850	
3. The mailing address (if differ	ent):		
4. Date of incorporation/qualific	eation: 8/28/1987	Document number: N22317	
5. The name and street address of Florida Department of State:	-	gent and registered office on file with t d)	he
Maxwell Thon:	pson, resigned		
280 E Pierce St			
Lake Alfred, FI	33850		2023
6. The name and street address (if changed):	of the new registered ager	at (if changed) and /or registered office	2023 JAN 20
William Gaff, O	Chair (new registered agent)	PH
280 E Pierce St	1	·	
Lake Alfred, Fl		NOT acceptable	<u>O</u> :
The street address of its registe as changed will be identical.	ered office and the street	address of the business office of its re	egistered agent.
Such change was authorized by authorized by the board, or the	y resolution duly adopted corporation has been no	I by its board of directors or by an off tified in writing of the change.	icer so
alistature of an other ordin	held rector	Alisha Hughes, VC Printed or typed name and title	
I hereby accept the appointment of my duties, and I am familian document is being filed merely corporation has been notified.	with and accept the obli- to reflect a change in th	d agree to act in this capacity, utes relative to the proper and comple igation of my position as registered a e registered office address, I hereby c	ete performance gent. Or, if this confirm that the
Lu Signature of Registered	Avent	01/112023	
If signing on behalf of an entit			
Typed or Printed Nam)(·		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)

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