

N23551

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TO: Amendment Section
Division of Corporations

SUBJECT: NAMI of Collier County, Inc.
Name of Corporation

DOCUMENT NUMBER: N23551

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:

Robert van Teeffelen

Name of Contact Person

NAMI of Collier County, Inc.

Firm/Company

6216 Trail Blvd, Bldg C

Address

Naples, FL 34108

City/State and Zip Code

robert@namicollier.org

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

For further information concerning this matter, please call:

Robert van Teeffelen

Name of Contact Person

at (239) 260-7300

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: NAMI of Collier County, Inc.
2. The principal office address: 6216 Trail Blvd, Bldg C, Naples FL 34108
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 11/19/1987 Document number: N23551

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)

Kathryn Hunter - deceased

6216 Trail Blvd, Bldg C

Naples, FL 34108

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

Pamela Baker

6216 Trail Blvd, Bldg C

P.O. Box NOT acceptable

Naples, FL 34108

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.

Larry E. Phillips
Signature of an officer or director

LARRY E. Phillips, Vice Chair & Treasurer
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.

Pamela Baker
Signature of Registered Agent

12/06/12
Date

If signing on behalf of an entity:

PAMELA BAKER / NAMI of COLLIER COUNTY, INC
Typed or Printed Name

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