

11/30/22, 9:54 AM

1725592

Division of Corporations

## Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EDDIE FERNANDEZ, PA

Account Number : I20190000058

Phone : (407)574-5009

Fax Number : (407)574-5953

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

John.ODonnell@myiccf.com

Email Address: \_\_\_\_\_

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CORP

## COR AMND/RESTATE/CORRECT OR O/D RESIGN

## CITRUS CIVITAN CLUB OF ORLANDO, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
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Electronic Filing Menu

Corporate Filing Menu

Help



December 2, 2022

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CITRUS CIVITAN CLUB OF ORLANDO, INC.  
P.O BOX 2763  
ORLANDO, FL 32802-2763US

SUBJECT: CITRUS CIVITAN CLUB OF ORLANDO, INC.  
REF: N25592

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FILED

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden  
Regulatory Specialist II

FAX Aud. #: H22000403079  
Letter Number: 322A00026618

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**COVER LETTER**TO: Amendment Section  
Division of CorporationsNAME OF CORPORATION: Citrus Civitan Club of Orlando, Inc.DOCUMENT NUMBER: N25592The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John H. O'Donnell

(Name of Contact Person)

Citrus Civitan Club of Orlando, Inc.

(Firm/ Company)

1331 Palmetto Avenue, Suite 100

(Address)

Winter Park, FL 32789

(City/ State and Zip Code)

johnhodonnell@gmail.com

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

For further information concerning this matter, please call:

John H. O'Donnell

(Name of Contact Person)

407

at

740-5337

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee☐ \$43.75 Filing Fee &  
Certificate of Status☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is  
Enclosed)**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

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Articles of Amendment  
to  
Articles of Incorporation  
of

Citrus Civitan Club of Orlando, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N 25592

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**  
(Principal office address **MUST BE A STREET ADDRESS**)**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**Name of New Registered Agent: John H. O'Donnell

1331 Palmetto Avenue, Suite 100

(Florida street address)

New Registered Office Address:

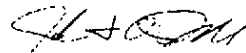
Winter Park, Florida 32789

(City)

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>PD</u>	<u>Johnson, Sophya</u>	
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>SD</u>	<u>Fricke, William S</u>	
<input checked="" type="checkbox"/> Remove			
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>SD</u>	<u>Tompkins, William</u>	
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TD</u>	<u>O'Donnell, John</u>	<u>1331 Palmetto Avenue, Suite 100</u> <u>Winter Park, FL 32789</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PD</u>	<u>Rowan, Kevin</u>	<u>135 W. Central Blvd., Suite 300</u> <u>Orlando, FL 32801</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: November 30, 2022  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

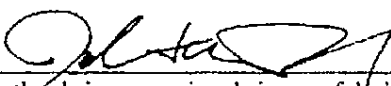
- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

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- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated November 28, 2022

Signature   
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

John H. O'Donnell

(Typed or printed name of person signing)

Treasurer / Director

(Title of person signing)

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RECEIVED

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