## 1723302

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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: ST. CLOUD MISSIONARY BAPTIST CHURCH Name of Corporation
DOCUMENT NUMBER: N 28302
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:
Rodney Rowe Name of Contact Person
ST. CLOUD MISSION ARY BAPTIST CHURCH INC.
2400 10 <sup>th</sup> STREET Address
ST. Choud FL 34769 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Redney Rowe at (407) 892-3444  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  Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (8/05)

## $^{\prime}$ STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH $_{\perp}$

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: ST. Cloud MISSIONARY BAPTIST CHURCH, TIC.  2. The principal office address: 2400 10Th STREET, ST. Cloud FL 34769
3. The mailing address (if different): P.O. Box 702012, ST. Cloud, FL 34770
4. Date of incorporation/qualification: Sept. 12, 1988 Document number: N 28302
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)  11. R. Thornton, Jr.  1449 Rummell Rd  Study F1.32770.0245  6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):  Rodney Rows / PASTOR of ST. Cloud Mission AR, BAPTIST CHURCH.  2400 10 <sup>Th</sup> STREET  P.O. Box NOT acceptable  ST. Cloud, FL 34769
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  The printer or typed name and little
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.
If signing on behalf of an entity:
Rodus y Rowk 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 (8/05)