

N36229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Gulf Breeze Area Historical Society

Name of Corporation

DOCUMENT NUMBER: N36229

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:

Barbara Udit

Name of Contact Person

Gulf Breeze Area Historical Society

Firm/Company

~~P.O. Box~~ 423 York Street

Address

Gulf Breeze, FL 32562-32561

City/State and Zip Code

barbaraudit111@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Udit

Name of Contact Person

at ( 850 ) 384-6941

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

2017 JUL 27 AM 10:40  
SECTION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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: Gulf Breeze Area Historical Society

2. The principal office address: P.O. Box 423 York Street  
Gulf Breeze, FL 32561

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 01/18/1990 Document number: N36229

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)

Beverly Ishol

1333 College Parkway #814

Gulf Breeze, FL 32563

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

Teresa Banfell

90 Shoreline Dr.

P.O. Box NOT acceptable

Gulf Breeze, FL 32561

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DIVISION OF CORPORATIONS

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.

Barbara J. Ledit  
Signature of an officer or director

Barbara Ledit  
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.*

Teresa Banfell  
Signature of Registered Agent

7/18/2017  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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