

N41773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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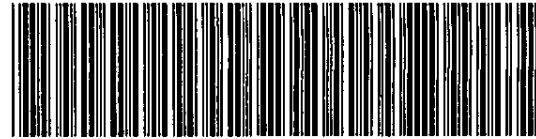
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Boca Raton Police Athletic League

Name of Corporation

**DOCUMENT NUMBER:** N41773

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 DeNeve**

Name of Contact Person

**Boca Raton Police Athletic League**

Firm/Company

**PO BOX 272753**

Address

**Boca Raton FL 33427**

City/State and Zip Code

**marcycava@hotmail.com**

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

For further information concerning this matter, please call:

**Marcella Cava**

Name of Contact Person

at ( **561** ) **843-1806**

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

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**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: Boca Raton Police Athletic League  
2. The principal office address: 160 NW 24th Street Bay 17, Boca Raton, FL 33432

3. The mailing address (if different): PO BOX 272753 Boca Raton, FL 33427

4. Date of incorporation/qualification: 1/22/1991 Document number: N41773

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)

~~\* Boca Raton Police Athletic League~~ MARCELLA CAVA  
100 NW 2nd Avenue  
Boca Raton FL 33432

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

~~Boca Raton Police Athletic League~~ MARCELLA CAVA  
160 NW 24th Street Bay 17,  
P.O. Box NOT acceptable  
Boca Raton, FL 33432

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.

Dennis Reilley

Signature of an officer or director

Dennis Reilley (Director)

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.*

Robert DeNeve

Signature of Registered Agent

9/26/2016

Date

If signing on behalf of an entity:

Robert DeNeve

Typed or Printed Name

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