1443938

(Re	questor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
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AND ANASSEE, FLORIC

PARS Sh

COVER LETTER

SUBJECT: Pin	nellas Cultural Foundation, Inc.		
	(Name of Corporation)	•	* * · · ·
DOCUMENT N	UMBER: N43938		
The enclosed State	tement of Change of Registered Office/Agent and fee are submitted for filin	ıg.	
Please return all c	correspondence concerning this matter to the following:		
	David W. Bryant		
	(Name of Contact Person)		
	Pinellas Cultural Foundation, Inc. (Firm/Company)		
	13805 58th St. N. Ste. 2450		
	(Address)		
	Clearwater FL 33760		
	(City/State and Zip Code)		
For further inform	nation concerning this matter, please call:		
David W.	Bryant at (727) 560-4285 ame of Contact Person) (Area Code & Daytime Telepho		-

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 pro statement of change	e is submitted	for a corporation o	rganized	under th	e laws oj	the State of $_{ ext{F}}$	lori		_
in_oraer to	cnange its re	gistered office or re	•	•	·	· ·	rida.		
1. The name of the	corporation:_								
2. The principal off	ice address:	13805 58th S	13805 58th St. N. Ste. 2450,			Clearwater	FL 3	33760	
3. The mailing addr	ess (if differe	nt):							<u></u>
4. Date of incorpora	ntion/qualifica	tion: 6/12/199	1	Docum	ent numb	per: N43938			
5. The name and str Florida Departme		the current register	ed agent:	and regis	stered off	fice on file with	the		
	Powers, J	udith B.							
	13805 58 t	h St. N. Ste.	2450	· \\	•				_
	Clearwate	r FL 33760					TAL	90	
6. The name and stre (if changed):	eet address of	the new registered	agent (if	changed	and /or	registered office	LAHAS	DEC -1	, mari
	Peter Riv	ellini					3. SEE, 1	2 3	- [
	13805 58t	h St. N. Ste.					FLOR	STAT	
	Clastrata	(P.O. Box NOT accept FL 33760	stable)				ğ	ਜੋ ਹਾਂ	
The street address of as changed will be	identical.						-	•	t,
Such change was at authorized by the b	ithorized by i	resolution duly add orperation has bee	pted by in notified	ts board I in writi	of directing of the	tors or by an of change.	ficer se	D	
(Signature of	2. Bun	cior	<u></u>	David		yant, Treas			
I hereby accept the I further agree to co of my duties, and I document is being for porporation has beg	appointment omply with the am familiar willed merely to on motified in	as registered agen e provisions of all vith and accept the reflect a change i writing of this cha	t and agr statutes r obligation in the reg nge.	ree to ac relative i on of my istered (t in this to the proposition of the proposition of the contraction of	capacity, oper and compl as registered a dress, I hereby o	ete per gent. confirm	formand Or, if th n that th	ce is ie
(Signatur	e of Registered A	gent)	· <u></u> -	 :	11/6/	(Date)			
If signing on behalf	of an entity:								
Typed	or Printed Name)			• • •					•

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