

19400002643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

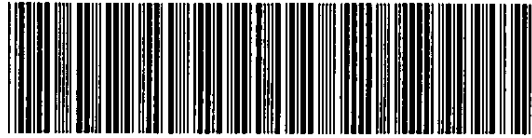
(Document Number)

Certified Copies

Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



300157259373

06/29/09--01063--010 **43.75

Amend

FILED
09 JUL 15 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7 Roberts JUL 15 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 6, 2009

DEBORAH A. THOMPSON
P O BOX 1177
FORT MCCOY, FL 32134

SUBJECT: FORT MC COY/EUREKA COMMUNITY SERVICE CENTER,
INCORPORATED
Ref. Number: N94000002643

We have received your document for FORT MC COY/EUREKA COMMUNITY SERVICE CENTER, INCORPORATED and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please list the street address of each officer/director.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 309A00022945

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Ft. McCoy/Eureka Community Service Center, Inc.

DOCUMENT NUMBER: N94000002643

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deborah A. Thompson

(Name of Contact Person)

(Firm/ Company)

P.O. Box 1177

(Address)

Fort McCoy Florida 32134

(City/ State and Zip Code)

Mrs. Marilyn Ward @ aol.com

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

For further information concerning this matter, please call:

Deborah A. Thompson

(Name of Contact Person)

at (352) 236-3685

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Fort McCoy/Eureka Community Service Center, Incorporated
(Name of Corporation as currently filed with the Florida Dept. of State)

N94000002643

(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:

N/A

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:

David Ward

New Registered Office Address:

P.O. Box 958, 14828 NE 112th Terrace
(Florida street address)

Ft. McCoy

(City)

Florida 32134
(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.

David C. Ward

Signature of New Registered Agent, if changing

FILED
09 JUL 15 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>VP</u>	<u>Dunson Garry</u>	<u>16420 NE 148</u> <u>Terrace Road</u> <u>Ft. McCoy, Fla. 32134</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>SEC</u>	<u>Thompson Deborah</u>	<u>16420 NE 148</u> <u>Terrace Road</u> <u>Ft. McCoy, Fla. 32134</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>IREA</u>	<u>Conley Karen</u>	<u>15789 NE Court</u> <u>Ft. McCoy, Fla. 32134</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

(attach additional sheets, if necessary). (Be specific)

[illegible]

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>SEC</u>	<u>Deborah^C Scholes</u>	<u>P.O. Box 784, 10035 cnty Hwy 316</u> <u>Ft. McCoy, Fla</u> <u>32134</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>TREA</u>	<u>Marilyn Ward</u>	<u>P.O. Box 958, 14828 NE 112th Terr</u> <u>Ft. McCoy, Fla</u> <u>32134</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>D</u>	<u>Claire Selph</u>	<u>11001 NE 149 Lane</u> <u>Ft. McCoy, Fla 32134</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

(attach additional sheets, if necessary). (Be specific)

~~Social Club Stewerth~~

(Attach additional sheets, if necessary)

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

[illegible]

The date of each amendment(s) adoption: June 22, 2009

(date of adoption is required)

Effective date if applicable: July 1, 2009

(no more than 90 days after amendment file date)

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.

☐ 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 June 22, 2009

Signature Deborah A. Thompson
(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)

Deborah A. Thompson
(Typed or printed name of person signing)

Secretary
(Title of person signing)