

U94000004749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

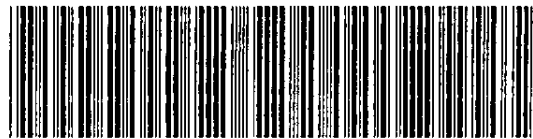
(Business Entity Name)

(Document Number)

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11 JUN 10 PM 1:08
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FALL RIVER, FL 33402

APPROVED
JUN 10 2011
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6/13/11
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Friend's of Veterans
Name of Corporation

DOCUMENT NUMBER: N94000004749

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:

Jerold A. Klein
Name of Contact Person

Friend's of Veterans
Firm/Company

900 Osceola Drive Suite 107 A
Address

West Palm Beach, FL 33409
City/State and Zip Code

jaklein9@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jerold A. Klein at (561) 790-4020
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
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 17, 2011

JEROLD A KLEIN
900 OSCEOLA DR STE 107A
W PALM BEACH, FL 33409

SUBJECT: FRIENDS OF VETERANS, INC.
Ref. Number: N94000004749

We have received your document for FRIENDS OF VETERANS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please have an officer or director sign the document.

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) 245-6957.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 311A00012221

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11 JUN 10 AM 8:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

**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: Friend's of Veterans, Inc.

2. The principal office address: 900 Osceola Drive West Palm Beach, FL 33409

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 9/28/1994 Document number: N94000004749

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)

Dennis P. Koehler Deceased 4/29/2011

Suite 107 A

900 Osceola Drive West Palm Beach, FL 33409

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

Jerold A. Klein

900 Osceola Drive West Palm Beach, FL 33409

P.O. Box NOT acceptable

Suite 107 A

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

DOUGLAS L. PHIPPS
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.


Signature of Registered Agent

May 2, 2011

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
CR2E045 (8/05)