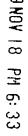
(Requestor's Name)	
(Address)	6003367
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	11/18/1901029
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	S TA 1
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COVER LETTER

"TO: Amendment Section **Division of Corporations** DONOVAN'S PARK COOPERATIVE, INC. Name of Corporation N94000006349 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: IRIS F WALKER Name of Contact Person LEE JAY COLLING & ASSOC PA Firm/Company 529 VERSAILLES DRIVE, S/103 Address MAITLAND, FL 32751 City/State and Zip Code donovanspark92@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Iris F. Walker Name of Contact Person 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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both. in the State of	r_FLORIDA	
1. The name of	the corporation: DONOVAN'	S PARK COOPERATIVE, IN	NC.	
2. The principal	office address: 16940 US HWY	19 NORTH, OFC 401, CLEARW	VATER, FL 33764	1
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 12/30/94	Document number: N940	00006349	
	d street address of the current regist rtment of State: (If resigned, enter r	tered agent and registered office on file vesigned)	with the	
	RONALD L. VANOVER		-	
	16940 US HWY 19 NOI	RTH, OFC 401	_	
	CLEARWATER, FL 337	'64	_	
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) and /or registered o	2019 NOV 18	
	LEE JAY COLLING, ES	SQ.		
	529 VERSAILLES DRIV	/E, S/103		T
	MAITLAND, FL 32751	ox NOT acceptable	PM 6: 3	
	· ·		_ '	
		street address of the business office of		
Such change w authorized by t	as authorized by resolution duly ac he board, or the corporation has be	dopted by its board of directors or by ar een notified in writing of the change.	ı officer so	
lacing	That	CAROL GAY, SECRE		
I hereby accept I further agree performance of	to comply with the provisions of a my duties, and I am familiar with	Printed or typed name and i ent and agree to act in this capacity. Il statutes relative to the proper and co and accept the obligation of my position to reflect a change in the registered offi ified in writing of this change.	mplete on as registered	
Leo D	ay Collina	11/5/19		
If signing on be	chalf of an entity:	Date		
	Small or Drintard Name			

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