

N 95000000052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

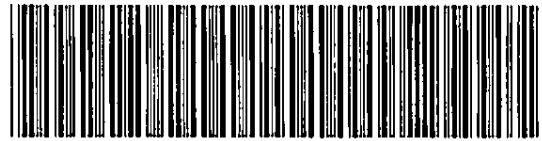
(Business Entity Name)

(Document Number)

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S TALLENT
FEB 01 2018

FILED
18 JAN 31 PM 1:43
CLERK OF COURT
CLERK OF COURT

Amend



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 17, 2018

CLIFFORD GODFREY
SAINT JOHN'S MISSIONARY BAPTIST CHURCH O
P.O. BOX 596
AVON PARK, FL 33826

SUBJECT: SAINT JOHN'S MISSIONARY BAPTIST CHURCH OF AVON PARK,
INC.
Ref. Number: N95000000052

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A post office box is not an acceptable address for the registered agent.

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) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 818A00001038

RECEIVED
JAN 31 PM 2:43
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 28, 2017

CLIFFORD GODFREY
SAINT JOHN'S MISSIONARY BAPTIST CHURCH O
P. O. BOX 596
AVON PARK, FL 33826

SUBJECT: SAINT JOHN'S MISSIONARY BAPTIST CHURCH OF AVON PARK,
INC.

Ref. Number: N95000000052

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 017A00026312

RECEIVED
18 JAN 16 AM 7:56

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Saint John's Missionary Baptist Church of Avon Park, Inc.
Name of Corporation

DOCUMENT NUMBER: N95000000052

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:

Clifford Godfrey
Name of Contact Person

St John's Missionary Baptist Church
Firm/Company

P.O. Box 596
Address

Avon Park, FL 33826
City/State and Zip Code

Clifford-godfrey@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Clifford Godfrey at (863) 873-6111
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

Articles of Amendment
to
Articles of Incorporation
of

SAINT JOHN'S MISSIONARY BAPTIST CHURCH OF AVON PARK, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N9500000052

(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)

2810 W. Wellston Rd

AVON PARK, FL 33825

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: Clifford Godfrey

New Registered Office Address:

2810 W. Wellston Rd.
AVON PARK, FL 33825

(City)

Florida

(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.

Clifford Godfrey

Signature of New Registered Agent, if changing

FILED

18 JAN 31 PM 1:43

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|---------------|--------------------------|---|
| 1) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>T</u> | <u>GRAY, Brenda</u> | <u>P.O. Box 596</u>
<u>Avon Park, FL 33826</u> |
| 2) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>Pastor</u> | <u>Storey, ANNIE</u> | <u>P.O. Box 596</u>
<u>Avon Park, FL 33826</u> |
| 3) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>T</u> | <u>Clifford Godfrey</u> | <u>P.O. Box 596</u>
<u>Avon Park, FL 33826</u> |
| 4) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>TR</u> | <u>DR Leslie Betters</u> | <u>P.O. Box 596</u>
<u>Avon Park, FL 33826</u> |
| 5) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>TR</u> | <u>Ruth Fleming</u> | <u>P.O. Box 596</u>
<u>Avon Park, FL 33826</u> |
| 6) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | <u> </u> | <u> </u> | <u> </u>
<u> </u>
<u> </u> |

[illegible]

The date of each amendment(s) adoption: 12-21-17, if other than the date this document was signed.

Effective date if applicable: 12-21-17
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 12-21-17

Signature Clifford Godfrey
(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)

Clifford Godfrey
(Typed or printed name of person signing)

Deacon, T
(Title of person signing)