

N/95000002102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

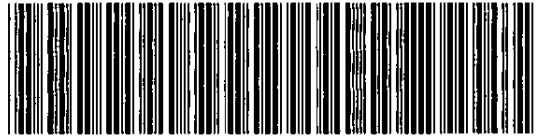
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RA to chy

FILED  
10 FEB 26 PM 12:51  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

MAR 01 2010

On 2010 do new Annual Report  
w/ changes in officers. This has to be  
done now to keep  
mailing address  
current.

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Clay County Juvenile Justice Council, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

Mike  
or  
Debbie  
I suggest Mike  
since checks  
have to  
accompany  
renewal forms  
etc.

MIKE MCCLENDON

Name of Contact Person

FIRST COAST FAMILY COUNSELING

Firm/Company

PO Box 9445

Address

FLEMING ISLAND FL 32006

City/State and Zip Code

firstcoastfamilycounseling@gmail.com

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

For further information concerning this matter, please call:

MIKE MCCLENDON

Name of Contact Person

at ( 904 ) 571-3130

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

**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: Clay County Juvenile Justice Council, Inc.
2. The principal office address: 23 South Green Street  
Green Cove Springs, FL 32043
3. The mailing address (if different): same
4. Date of incorporation/qualification: 5-1-1995 Document number: N95000002102
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)

(resigned) Norma V. Martin  
23 South Green Street  
Green Cove Springs, FL 32043

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

MIKE McCLENDON  
1719 SECLUDED WOODS WAY  
P.O. Box NOT acceptable  
FLEMING Island FL 32003

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

MIKE McCLENDON - TREASURER  
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

1/1/00  
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

FILED  
10 FEB 26 PM 12:51  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE