

N96000003702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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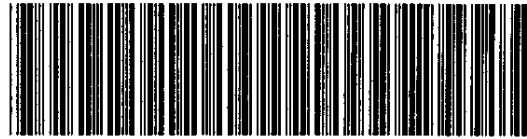
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 17 2014

T. CARTER

RA/RO change

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MULBERRY CHURCH OF CHRIST, INC.
Name of Corporation

DOCUMENT NUMBER: N96000003702

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:

BENJAMIN RADFORD SR.

Name of Contact Person

C/O MULBERRY CHURCH OF CHRIST, INC.

Firm/Company

626 KOALA COURT

Address

KISSIMMEE, FLORIDA 34759

City/State and Zip Code

gentleb@verizon.net

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

For further information concerning this matter, please call:

BENJAMIN RADFORD SR. at 407 460-4148

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

**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: MULBERRY CHURCH OF CHRIST, INC.
2. The principal office address: 1111 E. CANAL STREET
MULBERRY, FLORIDA 33860
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 7-11-96 Document number: N96000003702

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)

OWEN FAULK

ROUTE 3, BOX 59

WAUCHULA, FLORIDA 33873

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

BENJAMIN RADFORD SR.

626 KOALA COURT

P.O. Box NOT acceptable

KISSIMMEE, FLORIDA 34759

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
14 SEP - 3 PM 4:01

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

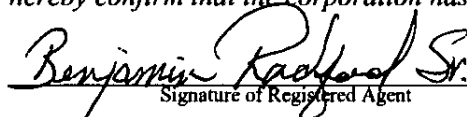
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

REGINA RADFORD, ST

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

8/27/14

Date

If signing on behalf of an entity:

MULBERRY CHURCH OF CHRIST, INC.

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