

N96000006252

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

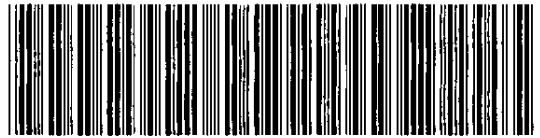
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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3/1/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hungarian American Citizens' Club, Inc. +
(Name of Corporation)

DOCUMENT NUMBER: N96000006252

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:

Mrs. Ester Marosy
(Name of Contact Person)

(Firm/Company)

12413 Lawrence St.
(Address)

Spring Hill, FL, 34609
(City/State and Zip Code)

For further information concerning this matter, please call:

Mrs. Ester Marosy at (352) 666-7507
(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

February 16, 2009

MRS. ESTER MAROSY
12413 LAWRENCE ST.
SPRING HILL, FL 34609

SUBJECT: HUNGARIAN AMERICAN SENIOR CITIZENS' CLUB, INC.
Ref. Number: N96000006252

We have received your document for HUNGARIAN AMERICAN SENIOR CITIZENS' CLUB, 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):

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) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 909A00005392

**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: Hungarian American Citizens' Club, Inc.
2. The principal office address: 12413 Lawrence St.
Spring Hill, FL, 34609
3. The mailing address (if different): P.O. Box 6192
Spring Hill, FL, 34611
4. Date of incorporation/qualification: 12/09/96 Document number: N96000006252
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)

Gyorgy Pintye RESIGNED !
1238 Melville Ave
Spring Hill, FL, 34608

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TALLAHASSEE, FLORIDA

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

Mrs. Ester Marosy
12413 Lawrence St.
(P.O. Box NOT acceptable)
Spring Hill, FL, 34609

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.

Ester Marosy
(Signature of an officer or director)

Mrs. Ester Marosy, President
(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.

Ester Marosy
(Signature of Registered Agent)

02/11/09
(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)