

N 97000000022

Requester's Name

RR 1 Box 81  
Robbinsville NC 28771

City/State/Zip

Phone #

200002989742--6  
-09/17/99--01052--010  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

FILED  
99 SEP 17 AM 9:28  
TALLAHASSEE, FLORIDA

- ☐ Walk in    ☐ Pick up time \_\_\_\_\_    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

*RDA change  
9-23-99  
#45*

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

Examiner's Initials

# CHANGE OF REGISTERED AGENT AND ADDRESS

Pursuant to provision in section 607.0502, 617.0502, 607.1508 or 617.1508 Florida Statutes, the undersigned not for profit corporation under the laws of the state of FLORIDA submits the following statement to change its registered agent and office address.

Wilderness Cove, Inc. (recently changed from Mountainview Stables & Camp Inc.)

*Name of Corporation*

RR 1 Box 81 Robbinsville, NC 28771

*Mailing Address*

Nov. 21 1996

*Date of Incorporation*

N97000000022

*Document #*

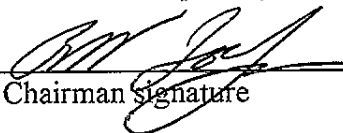
Robert W. Loafman, 9131 College Pkwy, 13B-146, Fort Myers, FL 33919

*Name and address of current agent*

William Loy, 5264 Clayton Court Suite 5, Fort Myers, FL 33907

*Name and address of new agent*

The street address of registered office and the agent has changed, as authorized by resolution adopted by the board of directors.

 8-18-99

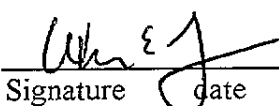
*Chairman Signature*

*Date*

Robert W. Loafman

*Name*

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

 9/7/99

*Signature* *date*

William E. Loy

*Type or write name*

Registered agent and board member

*capacity*

FILED  
99 SEP 17 AM 9:28  
CLERK OF STATE  
TALLAHASSEE, FLORIDA