

N97000001198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

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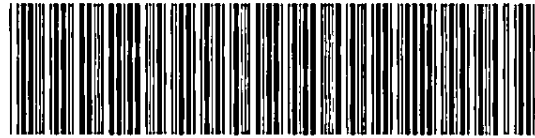
(Business Entity Name)

(Document Number)

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SEC. OF STATE
TALLAHASSEE, FLORIDA

RH/RD/chg

OCT 03 2018

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Smyrna Baptist Church, INC.
Name of Corporation

DOCUMENT NUMBER: N197000001198

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:

BARRY NIXON
Name of Contact Person

SMYRNA BAPTIST CHURCH, INC.
Firm/Company

815 W ORIENT ST
Address

Tampa FL 33603
City/State and Zip Code

master@smyrnaoftampa.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barry Nixon at (813) 223-3557
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Smyrna Baptist Church, Inc.

2. The principal office address: 815 W Orient St
Tampa FL 33603

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/26/1997 Document number: 197000001195

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)

ALAN NADDELL
812 W Orient St
Tampa FL 33603

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

BARRY NIXON
9140 Berkshire Lane
P.O. Box NOT acceptable
Tampa FL 33635

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2019 OCT -1 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

George H. Padgett - DEACON
Signature of an officer or director

George H. Padgett - DEACON
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.

Barry Nixon
Signature of Registered Agent

9/19/18
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***