N91000001938

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R.A. Change

7/10/08

COVER LETTER

Division of Corporations					
SUBJECT: EVANGELINE BOOTH RESIDENCE, INC.					
(Name of Corporati	on)				
DOCUMENT NUMBER: N97000001938					
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:					
rease return an correspondence concerning this matter to the following:					
Major Charles Powell					
(Name of Contact Person)					
Salvation Army , Southern Territorial Headquarters					
(Firm/Company))				
1424 Northeast Expressway					
(Address)					
Atlanta, GA 30329					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
Melanie Mathis Brackett (Name of Contact Person) at (4)	Area Code & Daytime Telephone Number)				
(Name of Contact Person) (.	Area Code & Daytime Telephone Number)				
Enclosed is a \$35.00 check made payable to the Department of State.					
Mailing Address	Street Address				
Mailing Address: Amendment Section	Street Address: Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle				
	Tallahassee, FL 32301				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.05 nge is submitted for a corpor r to change its registered offi	ration organized under	the laws of the State of		
1. The name of t	he corporation: EVANGELIN	NE BOOTH RESIDENC	E,INC.		
2. The principal Atlanta, GA	office address: 1424 Norther 30329	ast Expressway			
3. The mailing a	ddress (if different): same a	s above			
4. Date of incorp	poration/qualification: April (07, 1997 Docu	ment number: N97000	001938	
	I street address of the current tment of State:	registered agent and reg	gistered office on file w	ith the	
	Steven Hedgren			_	
	The Salvation Army, 5	5631 Van Dyke Ro	ad	_	
	Lutz, Florida 33558				
6. The name and (if changed):	I street address of the new reg	gistered agent (if change	ed) and /or registered of	2008 JUL -7 A SECRETARY C TALLAHASSEE	
	Vern Jewett			AAS	
	same as above			E PER E	
	(P.O. Box	NOT acceptable)		AH 11: 04 (OF STATE EE, FLORID	****
The street address changed will	ess of its registered office an be identical.	nd the street address of	the business office of		
Such change wa authorized by the	as authorized by resolution on board, or the corporation	duly adopted by its boa has been notified in w	ard of directors or by a riting of the change.	n officer so	
	(kent)	CHARI	LES M. POWELL	SECRETARY	
I hereby accept I further agree to finy duties, and document is bei corporation has	the appointment as register to comply with the provision of I am familiar with and ac ng filed merely to reflect a complete to reflect and reflect a	red agent and agree to is of all statutes relativ cept the obligation of r change in the registere this change.	(Printed or typed name and act in this capacity. e to the proper and cony position as register d office address, I here (Daty)	·	
	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