## N97000002872

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ Name	ECT: Edgewater Union Church, Inc. of Corporation	
DOC	UMENT NUMBER: N97000002872	
The er	nclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	matter to the following:
James	C. Peterson	
Name	of Contact Person	<del></del> ,
Peterse	on Law Group, PLLC	
Firm/0	Company	
418 Ca	anal Street	
Addre	SS	<del></del>
	myrna Beach, Fl. 32168	
City/S	tate and Zip Code	
	nichosco@hotmail.com	
E-ma	il address: (to be used for future annual	report notification)
For fu	rther information concerning this matter, p	please call:
Delane	ey Ritton	at (386 )428-2464
	Name of Contact Person	at (386 ) 428-2464  Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

## 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, to statement of change is submitted for a corporation organized under the laws of the State of Florida.	his	_		
in order to change its registered office or registered agent, or both, in the State of Florida.				
1. The name of the corporation: Edgewater Union Church				
2. The principal office address: 500 S. Ridgewood, Edgewater, FL 32132		-		
3. The mailing address (if different):		_		
4. Date of incorporation/qualification: 05/16/1997 Document number: N97000002872				
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)				
Sid C. Peterson, JrRESIGNED				
418 Canal Street				
New Smyrna Beach, FL 32168	<u> </u>	207		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	13.78.4 19.4(3303	1 APR 26		
James C. Peterson	ارت دى			
418 Canal Street	- 71	PH I		
P.O. Box NOT acceptable				
New Smyrna Beach, FL 32168		T: 05		
The street address of its registered office and the street address of the business office of its registeress changed will be identical.	ed ager	ıt,		
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.	I	4		
Signature of an officer or director  Signature of an officer or director  Signature of an officer or director  Printed or typed name and title	deral	(ar		
Signature of an officer or director  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 per of my duties, and I am familial with and accept the obligation of my position as registered agent. (I position as registered agent.)  I position has been notified in writing of this change.	forman Or, if th that th	ce us he		
Signature of Registered Agent  Date  Date  1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	-			
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 (04/13)