

197000004238

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APR 17 2017  
T. LEMIEUX

*AKO*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MARINE DISCOVERY CENTER, INC  
Name of Corporation

**DOCUMENT NUMBER:** N97000004238

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:

JULIE BARRS  
Name of Contact Person

MARINE DISCOVERY CENTER, INC  
Firm/Company

530 BARRACUDA BLVD.  
Address

NEW SMYRNA BEACH, FL 32169  
City/State and Zip Code

JULIE@MARINEDISCOVERYCENTER.ORG  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WENDY CASTINO at (386) 428-4828  
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 FLORIDA  
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MARINE DISCOVERY CENTER, INC
2. The principal office address: 520 BARRACUDA BLVD  
NEW SMYRNA BEACH, FL 32169
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 7/25/1997 Document number: N97000004238
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)  
BJ Stuart WOOD & STUART, PA  
206 FLAGLER AVE  
NEW SMYRNA BEACH, FL 32169
6. The name and street address of the new registered agent (if changed) and /or registered office  
(if changed):  
R. BROOKS CASEY WRIGHT & CASEY PA  
340 N. CAUSEWAY.  
P.O. Box NOT acceptable  
NEW SMYRNA BEACH, FL 32169

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.

  
Signature of an officer or director

FRIG HALLS, CHAIRMAN OF BOA  
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.

  
Signature of Registered Agent

4-10-17  
Date

If signing on behalf of an entity:

Richard B. Casey  
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 (03/12)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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