N97000006362

| (Requestor's Name) |
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| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: The Canterbury School of Florida Name of Corporation |
| DOCUMENT NUMBER: N97000006362 |
| 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: |
| Name of Contact Person Canterbury School of Florida Firm/Company QQO GAD A WE NE Address St Petersburg FL 33702 City/State and Zip Code Land Code Touch Thorach Firm/Company Address St Petersburg FL 33702 City/State and Zip Code Land Code Tankerburg florida.org E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Tristen Sussman at (727) 531-5902 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 Street Address: Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

: 1

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. | |
|---|---|
| 1. The name of the corporation: The Canterbury School of Florida Foundation, 1 2. The principal office address: 990 6272 AU 126 St. Petersburg: FL 33702 | n |
| 3. The mailing address (if different): | |
| 4. Date of incorporation/qualification: 11/10/1997 Document number: N9700001362 | |
| 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) | |
| Mac Hall | |
| 990 62nd Aue NE | |
| St. Petersburg FL 33702 | |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | |
| Hollis Amley 990 62nd AUNE P.O. Box NOT acceptable St. Petersburg, F133702 | , |
| 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 Steve McMullen Vice Chair Board 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. | |
| If signing on behalf of an entity: | |
| 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)