

PO10000119958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000278514190

10/30/15--01006--024 **35.00

FILED

2015 OCT 30 PM 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA/RO/CHS

NOV 2 2015
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Executive Shelter Corp
Name of Corporation

DOCUMENT NUMBER: P01000119988

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:

Gail Waters
Name of Contact Person
Executive Shelter Corp
Firm/Company
442 E. New York Ave #5
Address
Deland FL 32724
City/State and Zip Code
Waters_g@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gail Waters at 386, 943-9300
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 Fla in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Executive Shelter Corporation
2. The principal office address: 105 W. Wisconsin Ave #209
Deland, Fl 32720
3. The mailing address (if different): Same

4. Date of incorporation/qualification: 12/19/2001 Document number: PO1000119988

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)

Dennis Waters
105 W. Wisconsin Ave #209
Deland Fl 32720

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

Gail Waters
442 E New York Ave #5
Deland Fl 32724
P.O. Box NOT acceptable

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.

Gail Waters Gail Waters
Signature of an officer or director 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.

Gail Waters 10-22-2015
Signature of Registered Agent Date

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 (03/12)

FILED
2015 OCT 30 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA