## P07000020555

(Requestor's Name)
(Address)
(Address)
(Madress)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Davidson Factorial)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1 1
Effective Date

Office Use Only



400432935434

97/12/24--01911--997 ••35.00

FILED
2024 SEP -3 AM IO: 21

-N.)

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: MITZI TERRY PA	\	
DOCUMENT NUM	DOZOGOGOSS		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	MITZI TERRY		
		Name of Contact Perso	n
		Firm/ Company	
	5911 COLSON CT		
	THE VILLAGES, FLORIDA	Address	
		City/ State and Zip Cod	le
	MITZI.TERRY@THEVILL	AGES.COM	
	E-mail address: (to be us	ed for future annual repor	t notification)
For further informati	on concerning this matter, pleas	se call;	
MITZI TERRY		at (	551-4779
Name	of Contact Person		ode & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Ameno Divisio The C 2415 I	Address  Idment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

MITZI TERRY PA	
(Name of Corporation as current)	ly filed with the Florida Dept. ACCESEP -3 AM 10: 24
P07000020555	SECRETARY OF CTITE
(Document Number o	SECRETARY OF STATE of Corporation (if known)  FALLAHASSEE, FL
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contoin the word "corporation," "or "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
/Florida sti	. Florida
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New R	Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer. Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe				
X Remove	<u>V</u>	Mike Jones				
X Add	$\underline{SV}$	Sally Smith				
Type of Action (Check One)	<u>Title</u>	Name		Δ	<u>ddres</u> s	
1) Change	VP	ERNEST	L TERRY	59	11 COLSON CT	
Add X Remove				Ti	IE VILLAGES, FL	34785
2) Change						
Add						
Remove 3 ) Change						<del></del>
Add				<del></del> -	··-	
Remove						
4) Change						
Add				<del></del>		
Remove						
5) Change		-				
Add						
Remove						
6) Change		<del></del> _				
Add						
Remove						

(Attach a Idia	adding additional Articles l sheets, if necessary). (E	s, enter change(s) here:		
			•	
EKNEST TERRY F	ASSED AWAY. REMOV	AL REQUIRED.		
		•		
		<del></del>		
<u> </u>		<del></del>		
<del></del>				<del>_</del> .
<del> </del>	<del>-</del>			
	<del></del>			
			/	
			/	•
		<del></del>	<u>,                                      </u>	
<del> </del>		· · · · · · · · · · · · · · · · · · ·		
F. If an amendmen	it provides for an exchanging the amendr	ge, reclassification, or o	cancellation of issued :	shares, r
(if not appl	icable, indicate N/A)	<u> Acht ii not containea n</u>	r ine umenoment riser	<u>L.</u>
	<del> </del>	<del></del> .		
	<del></del> _		<del></del>	
	,			
	<del> </del>	<del> </del>		
		<u> </u>	<del></del>	

	JULY 3, 2024	
The date of each amendment(s) add	ption;	, if other than the
date this document was signed.		
	3, 2024	
Effective date if applicable:	(no more than 90 days after amendm	ent file date)
	The more than so days agree timenam	in fix dincy
Note: If the date inserted in this blo document's effective date on the Dep-	ck does not meet the applicable statutory filing artment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors wi	thout shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes casticient for approval.	st for the amendment(s)
• •	oved by the shareholders through voting groups.  nch voting group entitled to vote separately on th	
"The number of votes cast fo	r the amendment(s) was/were sufficient for appr	oval
by		
•	(voting group)	
JULY 3, 202	4	
Dated	And Amore	
Signature /	ector, president or other officer – if directors or o	Community by the same
selected,	by an incorporator – if in the hands of a receiver. I fiduciary by that fiduciary)	
	MITZI TERRY	
- <del>-</del> -	(Typed or printed name of person signi	ng)
Р	RESIDENT	
<del></del>	(Title of person signing)	

The date of each amendment(s) adoption: date this document was signed.  Effective date if applicable:  (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
Signature Divice
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
Mitzi toru
(Typed or printed name of person signing)
President
(Title of person signing)

## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000020555

Entity Name: MITZI TERRY, PA

**Current Principal Place of Business:** 

5911 COLSON CT

THE VILLAGES, FL 32163

**Current Mailing Address:** 

PO BOX 301

WILDWOOD, FL 34785

THE VILLAGES, FL 32163 US

FEI Number: 20-8438890 Name and Address of Current Registered Agent:

TERRY, MITZI 5911 COLSON CT

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Mar 13, 2024

**Secretary of State** 

1692679890CC

Certificate of Status Desired: No

Officer/Director Detail:

Title Name

Address

PRES

---

TERRY, MITZI

\_\_\_\_\_

PO BOX 301

City-State-Zip: WILDWOOD FL 34785

Title

Name

Address

.

TERRY, ERNEST L
PO BOX 301

VΡ

City-State-Zip: V

WILDWOOD FL 34785

I hereby certify that the information indicated on this report or supplemental report is true and accumite and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.



July 23, 2024

MITZI TERRY 5911 COLSON CT THE VILLAGES, FL 34785

SUBJECT: MITZI TERRY, PA Ref. Number: P07000020555

We have received your document for MITZI TERRY, PA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

1 12 pm.

Letter Number: 124A00016170



August 13, 2024

MITZI TERRY 5911 COLSON CT THE VILLAGES, FL 34785

SUBJECT: MITZI TERRY, PA Ref. Number: P07000020555

We have received your document for MITZI TERRY. PA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 024A00017868

www.sunbiz.org