

PD90000008674

(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



800196691448

03/09/11--01008--017 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAR -9 PM 2:10

Rd/chs
10 @ 3/10/11

Change of address
COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Doing Association Business, Inc
Name of Corporation

DOCUMENT NUMBER: 383795228

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:

Darlene A. Brinkley
Name of Contact Person

Doing Association Business, Inc
Firm/Company

215 Chene Down Lane
Address

Cape Canaveral, FL 32920
City/State and Zip Code

darlenebrinkley@bellsouth.net
E-mail address: (to be used for future annual report notification)
mailing address P.O. Box 37, Cape Canaveral

For further information concerning this matter, please call:

Darlene Brinkley at (321) 483 0344
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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Doing Association Business, Inc
2. The principal office address: 223 Columbia Dr.
Cape Canaveral, FL 32920
3. The mailing address (if different): P.O. Box 37
Cape Canaveral, FL 32920
4. Date of incorporation/qualification: 09 Document number: 383795228
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)

Darlene Brinkley
408 Harrison Ave #1
CAPE CANAVERAL, FL 32920

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

Darlene Brinkley
215 Cherie Town Lane
P.O. Box NOT acceptable
CAPE CANAVERAL, FL 32920

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
11 MAR -9 PM 2:10

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.

Darlene Brinkley
Signature of an officer or director

Darlene Brinkley
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.

Darlene Brinkley
Signature of Registered Agent

3-8-2011
Date

If signing on behalf of an entity:

Darlene A. Brinkley
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