

132785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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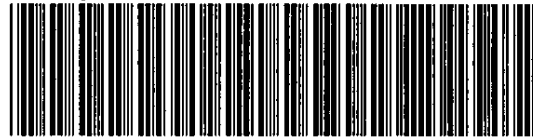
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** NATIONAL ASSOCIATION OF TEACHERS OF SINGING  
(Name of Corporation)

**DOCUMENT NUMBER:** P32285

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:

KANDIE K. SMITH, EXECUTIVE DIRECTOR  
(Name of Contact Person)

NATIONAL ASSOCIATION OF TEACHERS OF SINGING, INC.  
(Firm/Company)

9957 MOORINGS DRIVE, SUITE 401  
(Address)

JACKSONVILLE, FL 32257  
(City/State and Zip Code)

For further information concerning this matter, please call:

KANDIE K. SMITH at ( 904 ) 992-9101  
(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: NATIONAL ASSOCIATION OF TEACHERS OF SINGING, INC.

2. The principal office address: 9957 MOORINGS DRIVE, SUITE 401  
JACKSONVILLE, FL 32257

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 12/19/1990 Document number: P32285

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

REG. AGENT: WILLIAM VESSELS, 10550 BAYMEADOWS, #320, JACKSONVILLE, FL 32256

REG. OFFICE: 4745 SUTTON PARK COURT, SUITE 201, JACKSONVILLE, FL 32224

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

REG. AGENT: KANDIE K. SMITH, 2529 DEERWOOD LANE, SAINT AUGUSTINE, FL 32084

REG. OFFICE: 9957 MOORINGS DRIVE, SUITE 401, JACKSONVILLE, FL 32257

(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, and the board, or the officer, has been notified in writing of the change.

*Martha Randall*

\_\_\_\_\_  
(Signature of an officer or director)

**MARTHA RANDALL, PRESIDENT**

\_\_\_\_\_  
(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.*

*Kandie K. Smith*  
\_\_\_\_\_  
(Signature of Registered Agent)

**NOVEMBER 27, 2006**

\_\_\_\_\_  
(Date)

If signing on behalf of an entity:

NATIONAL ASSOCIATION OF TEACHERS OF SINGING, INC.

\_\_\_\_\_  
(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 (8/05)

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