

P98000086819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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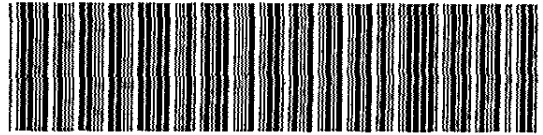
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Florida HHC, Inc. dba Martha's Retirement Home
(Name of Corporation)

DOCUMENT NUMBER: P98000086819

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brenda Roegale

(Name of Person)

Florida HHC, Inc. dba Martha's Retirement Home

(Name of Firm/Company)

3586 53rd Avenue North

(Address)

Saint Petersburg, Florida 33714

(City/State and Zip Code)

For further information concerning this matter, please call:

Audra Ackerman

(Name of Person)

at (727) 458-8607 OR 785-8350

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Florida NHC, Inc.
2. The principal office address: 3586 53rd Avenue North Saint Petersburg, Florida 44714
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10-08-1998 Document number: P88000086819
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Audra R. Ackerman 3586 53rd Avenue North Saint Petersburg, FL 33714

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

Brenda Roegge 3586 53rd Avenue North Saint Petersburg, FL 33714

(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.

X Brenda Roegge
(Signature of officer or director)

Brenda Roegge, Owner

(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.

X Brenda Roegge
(Signature of Registered Agent)

June 30, 2004

(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

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SECRETARY OF STATE