

Q17000000041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

n BRUCE  
APR 10 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 24, 2017

COMMUNITY CREDIT UNION FLORIDA (CCU)  
ATTN: LESLIE DOOLEY  
1030 S US HWY 1  
ROCKLEDGE, FL 32955

SUBJECT: COMMUNITY CREDIT UNION OF FLORIDA  
Ref. Number: W17000025364

We have received your document for COMMUNITY CREDIT UNION OF FLORIDA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 817A00005677

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TALLAHASSEE, FLORIDA

2017 APR -5 AM 11:38

TALLAHASSEE, FLORIDA



March 7, 2017

Department of State  
Division of Corporations  
ATT: Amendment Section  
P.O. Box 6327  
Tallahassee, FL 32314

Original  
for  
reference  
4/3/17

Community Credit Union of Florida (CCU) wishes to designate a place and registered agent as its sole location and agent for service of process. The document number for CCU is 60816. The Name and Address of the Registered Agent is:

1. Nancy Spencer, Primary  
1030 US Highway 1, Rockledge, FL 32955
2. Dawn Anderson, Secondary  
1030 US Highway 1, Rockledge, FL 32955

I, Nancy Spencer agree to be the primary appointment of the designated registered agent for service of process for Community Credit Union of Florida.

I, Dawn Anderson, agree to be the secondary appointment of the designated registered agent for service of process for Community Credit Union of Florida.

A check for \$35 is enclosed for processing this designation request. If you have any questions or need additional information, please contact Lesli Dooley, at 321.637.3141.

Sincerely,

Lesli Dooley,  
VP of Organizational Development

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Community Credit Union of Florida  
(Name of Alien Business Organization or Financial Institution)

Dear Sir or Madam:

The enclosed Designation of Registered Agent and Registered Office for Alien Business Organization or Financial Institution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lesli Doolley  
(Name of Person)

Community Credit Union of Florida  
(Firm/Company)

1030 S US Highway 1  
(Address)

Rockledge, FL 32955  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lesli Doolley at ( 321 ) 637-3141  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

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**Enclosed is a check for the following amount:**

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certified Copy

Already submitted

**DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR  
ALIEN BUSINESS ORGANIZATION OR FINANCIAL INSTITUTION**

PURSUANT TO SECTION 607.0505 OR 655.0201, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION OR FINANCIAL INSTITUTION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. Community Credit Union of Florida  
(Name of alien business organization or financial institution)
2. Florida  
(State or country under which entity is organized)
3. 59-0860768  
(FEI Number, if applicable)
4. 1030 S US Highway 1, Rockledge, FL 32955  
(Principal office address)

5. Name and Florida Street address of registered agent.

Nancy Spencer, Primary  
1030 S US Highway 1  
Rockledge, FL 32955

6. The street address of the registered office and the street address of the business office of the registered agent are identical.

7. Lesli Dooley  
(Signature of chairman, vice chairman, or officer)

8. Lesli Dooley, VP of Organizational Development  
(Name and capacity of person signing in number 7 above)

9. Signature of registered agent: Nancy L Spencer

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505 or 655.0201, Florida Statutes.*

Nancy L Spencer  
(Registered agent accepting appointment)

4/3/17  
(Date)

THE FILING OF THIS FORM WITH THE FLORIDA DEPARTMENT OF STATE DOES NOT AUTHORIZE THE ABOVE REFERENCED ENTITY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

**FILING FEE \$35**

Make checks payable to Florida Department of State and mail to:  
Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA