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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

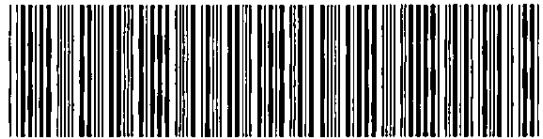
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Community Credit Union of Florida  
\_\_\_\_\_  
(Name of Alien Business Organization)

Dear Sir or Madam:

The enclosed Statement of Change of Registered Agent/Registered Office for Alien Business Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lesli Dooley  
\_\_\_\_\_  
(Name of Person)

Community Credit Union of Florida  
\_\_\_\_\_  
(Firm/Company)

1030 US Highway 1  
\_\_\_\_\_  
(Address)

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

For further information concerning this matter, please call:

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

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

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certified Copy

FILED  
2024 NOV -4 AM 9:13  
TALLAHASSEE, FL

**STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR  
REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION**

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE AND/OR REGISTERED AGENT:

1. Community Credit Union of Florida  
(Name of alien business organization)

2. 04/06/2017 3. 60816 4. 59-0860768  
(Florida registration date) (Florida document number) (FEI Number, if applicable)

5. 1030 US Highway 1, Rockledge, FL 32955  
(Principal office address)

6. Name and address of registered agent and office currently on record with this office:

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

7. New registered agent and/or office address:

Dawn Anderson  
1030 US Highway 1  
Rockledge, FL 32955

(Note: Registered office must be a Florida street address)

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

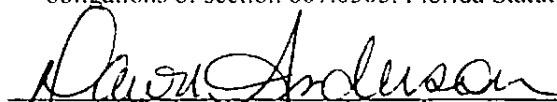
9. Such change was authorized by the board of directors or an officer of the corporation so authorized by the board of directors.

10.   
(Signature of chairman, vice chairman, or officer)

11. Lesli Dooley Chief Operations Officer  
(Name and capacity of person signing in number 10 above)

12. Signature of new registered agent, if applicable:

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

  
(Registered agent accepting appointment)

10-29-2024  
(Date)

**FILING FEE: \$35.00**

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



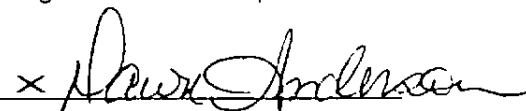
10/29/2024

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

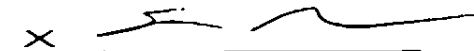
Community Credit Union of Florida (CCU) wishes to change the registered agents for service of process. The document number for CCU is 60816. The name and address of the Registered Agents are:

1. Dawn Anderson, Primary  
1030 US Highway 1, Rockledge, FL 32955
2. Sarah Nimnicht  
1030 US Highway 1, Rockledge, FL 32955
3. Nichole Narlock  
1030 US Highway 1, Rockledge, FL 32955

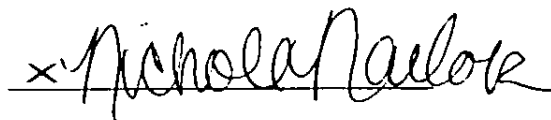
I, Dawn Anderson, agree to be the primary appointment of the designated agent for service of process for Community Credit Union of Florida.

x 

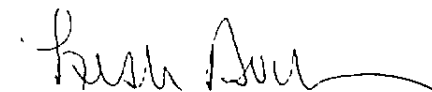
I, Sarah Nimnicht, agree to the appointment of designated agent of the service for process for Community Credit Union of Florida.

x 

I, Nichole Narlock, agree to the appointment of designated agent for the service of process for Community Credit Union of Florida.

x 

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



Lesli Dooley,  
Chief Operations Officer