

**REGISTERED AGENT  
STATEMENT OF APPOINTMENT**

(Section 106.022, F.S.)

OFFICE USE ONLY

19 OCT 1 PM 3:36

- Original Appointment       Change of Appointment  
 Change of Mailing Address       Change of Physical Address

**Registered Agent and Office Information**

Name MARY BENEDICT		Telephone 352-331-7643
Street Address 8802 SW 38 <sup>th</sup> AVE., GAINES		
City GAINESVILLE	State FL	Zip Code 32608
Mailing Address SAME		
City	State	Zip Code

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.

Mary A Benedict      10/1/19  
Signature of Registered Agent      Date

**Former Registered Agent and Office Information (for changes only)**

Name Brian Scarborough		Telephone (386) 717-4965
Street Address 1120 NW 13 <sup>th</sup> St.		
City Gainesville	State FL	Zip Code 32601

**Committee or Organization Information**

Name of Committee or Organization CITIZENS FOR STRONG SCHOOLS INC.		
Street Address 8802 SW 38 <sup>th</sup> Ave.		Telephone 352-331-7643
City GAINESVILLE	State FL	Zip Code 32608

Mary A Benedict  
Signature of Chairperson

MARY BENEDICT      10/1/19  
Printed Name of Chairperson      Date

