

716177

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

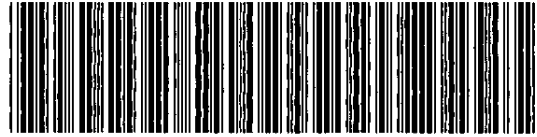
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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*RA RJ
6-502*



FORT LAUDERDALE
BOYNTON BEACH
ST. AUGUSTINE
ORLANDO
NAPLES
MIAMI

PLEASE ADDRESS ALL CORRESPONDENCE TO:

1501 NORTHWEST 49TH STREET, 2ND FLOOR
FORT LAUDERDALE, FLORIDA 33309
TEL 954.486.7774 FAX 954.486.7782

PLEASE RESPOND DIRECTLY TO:

LEIGH C. KATZMAN, ESQ.
lkatzman@katzkorr.com

May 23, 2008

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

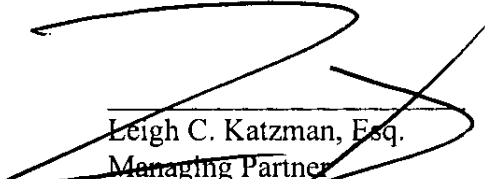
Re: *Regency Tower South Association, Inc.*
Resignation of Registered Agent

Dear Sir / Madam:

Enclosed please find the *Resignation of Registered Agent or for a Corporation* which has been properly filled out by this office and. Furthermore, enclosed please find a check made payable to the Department of State in the amount of \$87.50. Should you require any further information or documentation with respect to the Change of Registered Agent for the above referenced corporation, please contact me at the number listed below.

Sincerely,

KATZMAN & KORR



Leigh C. Katzman, Esq.
Managing Partner

LCK:vv

Enclosure

cc: Board of Directors
Property Manager

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

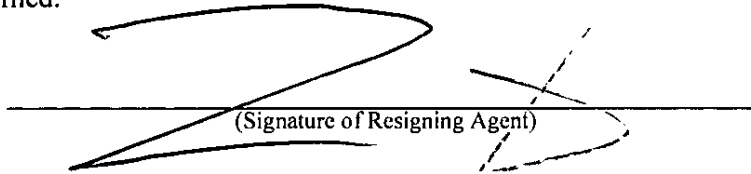
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Katzman Garfinkel, P.A.
(Name of Registered Agent)

hereby resigns as Registered Agent for Regency Tower South Association, Inc.
(Name of Corporation)

716177
(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which
this statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

Leigh C. Katzman, Esq.
(Typed or Printed Name)

Managing Partner of Katzman Garfinkel, P.A.
(Capacity)

Fee for filing this document:

- \$87.50 - Active corporation
- \$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

**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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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