

300003172773--5 -03/16/00--01072-002 \*\*\*\*\*875.00 \*\*\*\*\*87.50

Office Use Only

**Examiner's Initials** 

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1(Corporation Name)	(Document #)
. 2. (Corporation Name)	,
(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time _ Mail out ☐ Will wait	Photocopy  Certified Copy  Certificate of Status
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 61	17.1509	, Flor	ida
Statutes, the undersigned, <u>John T. Kinsey, Esq.</u> hereby resigns as Reginated Agent)	istered A	Agent	for
Transeastern Properties, Inc. (Name of corporation)			
A copy of this resignation was mailed to the above listed corporation at its last k	nown ac	idres	S.
The agency is terminated and the office discontinued on the 31st day after the dat statement is filed.	e on wh	uch tl	is
(Signature of resigning agent)  If signing on behalf of an entity:  (Typed or Printed Name)	SECRETARY OF STATE LLAHASSEE, FLORIDA	00 MAR 17 PM 1:03	

Fee for filing this document:

(Capacity)

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

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