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TRETARY OF STATE
TSEE, FLORISH

TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: PARKLAND GOLFE COUNTRY CLUB FOUNDATION, INC. (Name of Corporation) |
| DOCUMENT NUMBER: NO300000624 |
| The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Name of Person) |
| WCI PROPERTY MANAGEMENT (Name of Firm/Company) |
| 11575 HERON BAY BLVD. (Address) |
| CORAL SPRINGS, FL 33076 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| James Nylvist at (954) 825-4670 (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation. |
| Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399 |

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, JAMES NYQUIST | | | |
| (Name of Registered Agent) | | | |
| hereby resigns as Registered Agent for PARKLAND GOLFE COUNTRY CL (Name of Corporation) | UB F | DNL. | INC. |
| N0300000624 | | | |
| (Document Number, if known) | | | |
| A copy of this resignation was mailed to the above listed corporation at its last know | wn addr | ess. | |
| The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed. | on whic | h | |
| Lugar Hla I | | | |
| (Signature of Resigning Agent) If signing on behalf of an entity: | SEC | 05/ | |
| Tames NYGViST (Typed or Printed Name) | RETARY | PR-I | |
| (Typed or Printed Name) | OF SI | PM I | ED |
| Registered Agent | ATE | 1:07 | |

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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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