N05000007063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Resignation of RA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 02 2015
A RAMSEY

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WALDEN RESERVE HOA
(Name of Corporation)

DOCUMENT NUMBER: N5000007063

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:

Deborah Parker
(Name of Person)

Leland Management
(Name of Firm/Company)

6972 Lake Glorida Blvd
(Address)

Orlando, FL 32809
(City/State and Zip Code)

For further information concerning this matter, please call:

Deborah Parker at (407) 982-3137
(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of State for $87.50 for an active corporation or $35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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, LELAND MANAGEMENT, INC

(Name of Registered Agent)

hereby resigns as Registered Agent for WALDEN RESERVE HOMEOWNERS ASSOCIATION, INC.

(Name of Corporation)

N05000007063

(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.

Mary Carol Shaver

(Signature of Resigning Agent)

If signing on behalf of an entity:

MARY CAROL SHAVER

(Typed or Printed Name)

AGENT

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$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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