# 106704

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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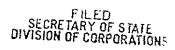
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SECRETARY OF STATE DIVISION OF CORPORATIONS

R. A. Resignation 4-7-03

### TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Catholic Charities of the Diocese of Venice, Inc.
(Name of Corporation)
DOCUMENT NUMBER: N06704
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:
Victoria H. Pflug Erquiaga, Esq.
(Name of Person)
Diocese of Venice
(Name of Firm/Company)
1000 Pinebrook Road
(Address)
Venice, FL 34292
(City/State and Zip Code)
For further information concerning this matter, please call:
Victoria H. Pflug Erquiaga, Esq. at ( 941 ) 484-9543  (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32314 Tallahassee, FL 32399



## 2003 MAR 31 AM 9: 37

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

ursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
lorida Statutes, the undersigned, Victoria H. Pflug
(Name of Registered Agent)
ereby resigns as Registered Agent for Catholic Charities of the Diocese of Venice, Inc.
(Name of Corporation)
N06704
(Document Number, if known)
copy of this resignation was mailed to the above listed corporation at its last known address
he agency is terminated and the office discontinued on the 31st day after the date on which his statement is filed.
Victoria Eguação
(Signature of Resigning Agent)
signing on behalf of an entity:
Catholic Charities of the Diocese of Venice, Inc.
(Typed or Printed Name)
Registered 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