

NO70000003491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

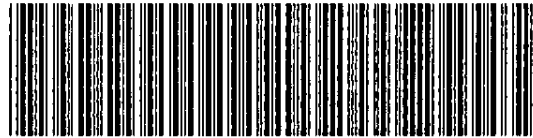
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100192926131

02/04/11--01039--006 \*\*122.50

RA Rsgd

FILED  
11 FEB -4 PM 3:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2-7-11

LAW OFFICES  
OF  
**Bacon & Bacon, P.A.**  
A Professional Association

2959 FIRST AVENUE NORTH  
ST. PETERSBURG, FLORIDA 33713

BACON & BACON, P.A.  
ADRIAN S. BACON (19242001)  
DAVID A. BACON

TELEPHONE: 727-327-3935  
FACSIMILE: 727-323-4936

February 1, 2011

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**IN RE: Misty Glen Homeowners Association, Inc.**

To whom it shall concern:

I am enclosing herewith the following documents to be filed with the State:

1. Resignation of Registered Agent; and
2. Statement of Change of Registered Agent

I am also enclosing herewith a check in the amount of \$122.50 representing the filing fee for each instrument. Should you have any questions or require any additional documentation, please advise me accordingly.

Thanking you for your attention to the foregoing, I am

Sincerely,  
BACON & BACON, P.A.

Jodilynn Furlong,  
Florida Registered Paralegal  
Enclosure

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

**FILED**  
11 FEB -4 PM 3:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, ANDREA MAZUCHOWSKI

(Name of Registered Agent)

hereby resigns as Registered Agent for MISTY GLEN HOMEOWNERS ASSOCIATION, INC.

(Name of Corporation)

N07000003491

(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:

ANDREA MAZUCHOWSKI

(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withdrawn corporation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**