N9600000 6153

(Re	equestor's Name)			
(Ac	idress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phon	e #) .		
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ECRETARY OF STATE
LL AHASSEE, FLORIDA

01/31/08

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	TECT: Ashwood Homeowners Association of Sarasota, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: N96000006153
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Roy	E. Dean
-	(Name of Person)
Judo	d, Ulrich, Scarlett, Summonte & Dean, P.A.
-	(Name of Firm/Company)
294	0 South Tamiami Trail
	(Address)
Sara	asota, FL 34239
	(City/State and Zip Code)
For fu	orther information concerning this matter, please call:
Roy	E. Dean at (941) 955-5100 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo or \$35	sed is a check made payable to the Florida Department of State for \$87.50 for an active corporation 5.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sectio	ns 607.0502(2), 617.0502(2), 607.150	9, or 617.1509,
Florida Statutes, the undersigned,	Roy E. Dean	
(Name of Registered Agent		
hereby resigns as Registered Agent	for Ashwood Homeowners Associ	iation of Sarasota, Inc.
nereby resigns as Registered Agent	(Name of Corporation	n)
N96000006153		
(Document Number, if known)		
A copy of this resignation was mail	led to the above listed corporation at i	ts last known address.
The agency is terminated and the of this statement is filed.	ffice discontinued on the 31st day afte	r the date on which
	Toy E Dein	
	(Signature of Resigning Agent)	
If signing on behalf of an entity:		08 JI SECRI
	(Typed or Printed Name)	JAN 28 A RETARY C AHASSEE
<u> </u>	(Capacity)	F STAT

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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