## 194000003094

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RA Resign Thews 9-16-10

## **COVER LETTER**

	Cross Creek of Ocoee Homeowners Association Inc.
	(Name of Corporation)
OCUMEN	Г NUMBER: N94000003094
he enclosed	Resignation of Registered Agent for a Corporation and fee are submitted for filing
Please return	all correspondence concerning this matter to the following:
Erika Shee	han, Records Administrator
	(Name of Person)
Southwest	Property Management of Central Fl., INC.
	(Name of Firm/Company)
PO Box 78	3367
	(Address)
Winter Gar	den, FL 34778
<del></del>	(City/State and Zip Code)
D C (1 '	formation concerning this matter, please call:
for further in	
For further in Erika Sheel	at (407) 656-1081  (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

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Pursuant to the provisions of sections 6	SECRETARY OF STATE 1411 ANA SSEE, FLORIDA 07.0502(2), 617.0502(2), 607.1509, or 617.1509, SSEE, FLORIDA
	57.0302(2), 017.0302(2), 007.1309, 01 017.1309, 14477 EDRIDE
Florida Statutes, the undersigned, Sp	encer Solomon
	(Name of Registered Agent)
hereby resigns as Registered Agent for	Cross Creek of Ocoee Homeowner's Association, Inc.
	(Name of Corporation)
N94000003094	
(Document Number, if known)	<del>_</del>
A copy of this resignation was mailed to	o the above listed corporation at its last known address.
this statement is filed.	discontinued on the 31st day after the date on which  gnature of Resigning Agent)
If signing on behalf of an entity:	
Southwest Proper	ty Management of Central Fl., INC.
. (	Typed or Printed Name)
President	
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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