

Florida Department of State

Division of Corporations

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PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

REGISTERED AGENT RESIGNATION

BRIGID'S CROSSING FOUNDATION INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

Help



July 31, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BRIGID'S CROSSING FOUNDATION INC.

PO BOX 366955

BONITA SPRINGS, FL 34136

SUBJECT: BRIGID'S CROSSING FOUNDATION INC.

REF: F08000004119

PLEASE GIVE ORIGINAL SUBMISSION
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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please remove the comma after the word Foundation.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
Regulatory Specialist II

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Brigid's Crossing Foundation Inc.

(Name of Corporation)

DOCUMENT NUMBER: F08000004119

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:

Carol A. Regula

(Name of Person)

Zenerji LLC

(Name of Firm/Company)

5801 Pelican Bay Blvd., Suite 104

(Address)

Naples, FL 34108

(City/State and Zip Code)

For further information concerning this matter, please call:

Carol A. Regula

(Name of Person)

at 239 436-2760

(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**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, A. Keith Machen
(Name of Registered Agent)

hereby resigns as Registered Agent for Brigid's Crossing Foundation Inc.
(Name of Corporation)

F08000004119

(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.

A. Keith Machen
(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(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

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