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or star

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: TRAils Homeowness Association TNC. Name of Corporation
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rob Bridger President Name of Contact Person
The Trails Homeowners Association Inc.
P.O. BOX 908 Address
ORmord Beach FL 32175 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Many Loudson Admin Assist. at (384) 673-0855 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Street Address: Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

CR2E045 (03/12)

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, Kenreth Nelson (Name of Registered Agent)	-		
hereby resigns as Registered Agent for <u>FRAIS Homeowices</u> Association	-nc	•	
7.33.55 (Document Number, if known) A copy of this resignation was mailed to the above listed corporation at its last known	ww add	lrecc	
A copy of this resignation was maned to the above fisted corporation at its last kild	wii add	1035.	
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed. (Signature of Resigning Agent)	on whi	ch in DEC 13	
If signing on behalf of an entity:	Per TH FT LED FT	PH 1: 29	Ċ
(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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