736572

(Requestor's Name)				
(Address)				
,				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Coomisso Line)				
(Document Number)				
Certified Copies Certificates of Status				
0 11 1 1 1 1 1 1				
Special Instructions to Filing Officer:				
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07/12/12--01017--020 **210.00

08/21/12--01007--011 **315.00

(AUG 2 8 2012 C. MUSTAIN





COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJECT: TOWNHOUSES AT BONNIE BAY CONDO ASSOC., INC.				
(Name of Corporation)				
DOCU	JMENT NUMBER: 736572			
The en	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:				
MA	RY A. WHITE			
	(Name of Person)			
QUA	LIFIED PROPERTY MANAGEMENT, INC.			
	(Name of Firm/Company)			
590)1 US HWY. 19, STE. 7Q			
	(Address)			
NE'	W PORT RICHEY, FL 34652 (City/State and Zip Code)			
For further information concerning this matter, please call:				
MA	(Name of Person) at (727)869-9700 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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





FLORIDA DEPARTMENT OF STATE Division of Corporations

July 12, 2012

MARY A. WHITE 5901 US HWY 19 SUITE 7Q NEW PORT RICHEY, FL 34652

SUBJECT: TOWNHOUSES AT BONNIE BAY CONDOMINIUM ASSOCIATION,

INC.

Ref. Number: 736572

We have received your document for TOWNHOUSES AT BONNIE BAY CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance due of \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Carol Mustain Regulatory Specialist II

Letter Number: 412A00018711

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 61	7 7 1509
<u> </u>	IALIEED DOODEDTY MAANACEM	ENTENN S
Florida Statutes, the undersigned, QU	ALIFIED PROPERTY MANAGEM	EIA-I "ÎIA
	(Name of Registered Agent)	# 55
hereby resigns as Registered Agent for	TOWNHOUSES AT BONNIE BAY CO	ONDO ASS
	(Name of Corporation)	
736572		PH 4: 35
(Document Number, if known)		<u></u>
A copy of this resignation was mailed t	o the above listed corporation at its last kn	own address.
this statement is filed.	e discontinued on the 31st day after the dat	e on which
If signing on behalf of an entity:	ignition of realigning righting	
	OPERTY MANAGEMENT, INC.	~
	(Typed or Printed Name)	
CEO		_
	(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