

738345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 20 AM 9:14

FA/RES
10/20/12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2012

JAN 12 2012

MARY A. WHITE, CEO
QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY. 19, STE. 7Q
NEW PORT RICHEY, FL 34652

SUBJECT: VILLAS CAPRI ASSOCIATION, INC.
Ref. Number: 738345

We have received your document for VILLAS CAPRI 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):

Our records show the registered agent as QUALIFIED PROPERTY MGMT INC.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 812A00000498

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Villas Capri Association, Inc.
Name of Corporation

DOCUMENT NUMBER: 738345

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:

Mary A. White, CEO
Name of Contact Person

Qualified Property Management, Inc.
Firm/Company

5901 US Hwy. 19, Ste. 7Q
Address

New Port Richey, FL 34652
City/State and Zip Code

mary@qualifiedproperty.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary A. White at (727) 869-9700
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
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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, MGMT
Qualified Property Management, Inc.

(Name of Registered Agent)

hereby resigns as Registered Agent for Villas Capri Association, Inc.

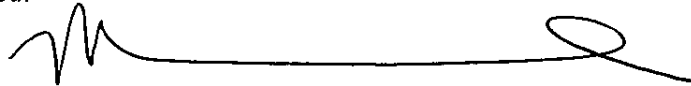
(Name of Corporation)

738345

(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.



(Signature of Resigning Agent)

If signing on behalf of an entity:

MGMT
Qualified Property 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

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DIVISION OF CORPORATIONS
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