

748653

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

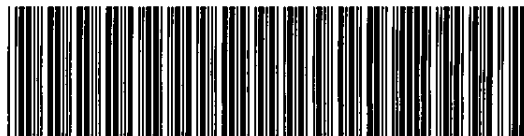
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 13 PM 2:09

And Diss
@ 2/13/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hoot owl Ridge Comm ASSO

DOCUMENT NUMBER: 748653

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CHARLENE A. WARK
(Name of Contact Person)

(Firm/Company)

203 Summit Rd
(Address)

SATSUMA Florida 32189
(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Contact Person) at (386) 649-9613
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 1, 2012

CHARLENE A. WARK
HOOT OWL RIDGE COMMUNITY ASSOCIATION
203 SUMMIT RD
SATSUMA, FL 32189

SUBJECT: HOOT OWL RIDGE COMMUNITY ASSOCIATION, INC.
Ref. Number: 748653

We have received your document for HOOT OWL RIDGE COMMUNITY 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 application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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.

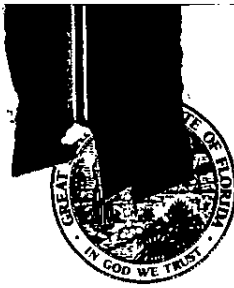
Irene Albritton
Regulatory Specialist II

Letter Number: 512A00003689

RECEIVED

12 FEB 13 AM 9:36

TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 26, 2012

CHARLENE A. WARK
HOOT OWL RIDGE COMMUNITY ASSOCIATION INC
203 SUMMIT RD
SATSUMA, FL 32189

SUBJECT: HOOT OWL RIDGE COMMUNITY ASSOCIATION, INC.
Ref. Number: 748653

We have received your document for HOOT OWL RIDGE COMMUNITY 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):

PLEASE COMPLETE THE FORM IN ITS ENTIRETY.

The document must have original signatures.

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: 212A00002078

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12 FEB - 1 AM 8:34
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Hoot Owl Ridge Comm ASSO

SECOND: The document number of the corporation (if known): ~~8/27/1979~~ 748653

THIRD: The file date of the articles of incorporation: 8/27/79

FOURTH The corporation has not commenced to conduct its affairs.

FIFTH: No debts of the corporation remains unpaid.

SIXTH: Adoption of Dissolution **(CHECK ONE)**
(Note: Cannot be authorized by an incorporator if the corporation has directors)

☒ The dissolution was authorized by a majority of the directors:
OR

☐ The dissolution was authorized by an incorporator.

☐ The dissolution was authorized by a majority of the incorporators.

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DIVISION OF CORPORATIONS
12 FEB 13 PM 2:09

Signature: Charlene A Work

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

CHARLENE A WARK
(Typed or printed name of person signing)

TREASURER
(Title of person signing)

Filing Fee: \$35