# 749432

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### **WILLIAM A. DONOVAN, P.A.**

Board Certified Civil Trial Attorney 2671 Airport Road South Suite 304 Naples, Florida 34112

Phone: 239-793-0013 Fax: 239-775-8581

Email: wdonovan@comcast.net

July 6, 2009

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Four Seasons Property Owners Association, Inc.

To Whom It May Concern:

Enclosed you will find a Resignation of Registered Agent for a administratively dissolved corporation, Four Seasons Property Owners Association, Inc., document #749432. Please see that this is appropriately filed.

Sincerely,

WILLIAM A. DONOVAN

WAD/sb

Enc.

Cc: Calley Fletcher
Dan Garren
Nick LaGrasta
Bob Newsome
Lloyd Montgomery

#### **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Four Seasons Property Owners Association, Inc.  (Name of Corporation)	-
DOCUMENT NUMBER: 749432	-
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for	r filing.
Please return all correspondence concerning this matter to the following:	
William A. Donovan	
(Name of Person)	
William A. Donovan, P.A.	
(Name of Firm/Company)	
2671 Airport Rd. So., Ste. 304	
(Address)	
Naples, FL 34112	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Calley Fletcher at (239 ) 250-8613 (Name of Person) at (Carea Code & Daytime Telephone Number)	Ē
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an act or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation	tive corporation on.
Amendment Section Division of Corporations Clifton Building, 2661 Executive Center Circle Tallahassee, FL 32301  Division of Corporations Division of Corporations Post Office Box 6327 Tallahassee, F 3 314	

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the Trovisions of sections 6	6071050212 + 6171050212 + 6071509, or 617	□509,
Florida Latutes, the undersigned,W	'illiam A. Donovan	
	plane of Registered Agent I	
here Tyresigns as Zegistered Tgent for	Four Seasons Property Owners Assn.	, Inc.
note signosigns as registered argent for	Name of Corporation 1	<del></del>
749432		
Blocu Hent Bu HTer, if Ino In H		
□ co⊞of this resignation □as □ailed t	to the a⊡ove listed cor□bration at its last □no	o□n address□
The agenc⊡is ter⊡inated and the office this state □ent is filed □	e discontinued on the 31st da□after the date	on □hich
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If signing on □ehalf of an entit□□		99 SECTALL
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#### Fee for filing this document:

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Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314