

756986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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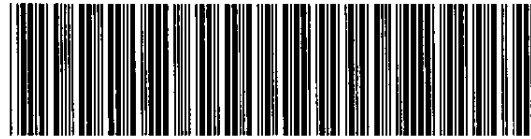
(Business Entity Name)

(Document Number)

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AUG 28 2012

C. MUSTAIN

EMR

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VILLAS OF BEACON GROVES HOMEOWNER'S ASSN., INC.
(Name of Corporation)

DOCUMENT NUMBER: 756986

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARY A. WHITE, CEO

(Name of Person)

QUALIFIED PROPERTY MANAGEMENT, INC.

(Name of Firm/Company)

5901 US HWY. 19, SUITE 7Q

(Address)

NEW PORT RICHEY, FL 34652

(City/State and Zip Code)

For further information concerning this matter, please call:

MARY A. WHITE

(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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



ENTERED

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: VILLAS OF BEACON GROVES HOMEOWNERS' ASSN., INC.
Ref. Number: 756986

We have received your document for VILLAS OF BEACON GROVES HOMEOWNERS' ASSN., 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: 512A00018710

**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, QUALIFIED PROPERTY MANAGEMENT, INC.
(Name of Registered Agent)

hereby resigns as Registered Agent for VILLAS OF BEACON GROVES HOMEOWNER'
(Name of Corporation)

756986

(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:

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

FILED
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SECRET
FALLS CHURCH, VA