## 761818

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Bocament Namber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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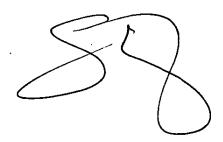
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 28, 2007

COASTAL MANAGEMENT SERVICES POST OFFICE BOX 1407 PORT RICHEY, FL 34673

SUBJECT: VILLAGE OF GLENWOOD CONDOMINIUM ASSOCIATION, INC.

Ref. Number: 761818

We have received your document for VILLAGE OF GLENWOOD CONDOMINIUM ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

To resign as registered agent for an active corporation, the enclosed resignation form should be completed and returned with a filing fee of \$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) 245-6908.

Sylvia Gilbert Document Specialist

Letter Number: 607A00057035

## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: 11 age OF Glonwood Condo (Name of Corporation)
DOCUMENT NUMBER: 16/8/8
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:
Jeanette Harrington (Name of Person)
Village of Glenwood Condo (Name of Firm/Company)
Port Richey R 34668 (City/State and Zip Code)
(City/State and Zip Code)  For further information concerning this matter, please call:
(Name of Person) at ()  (Area Code & Daytime Telephone Number)
Delegal in the standard and the Chail December of Charles for 697 50 for an action compared

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

TO:

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

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

rsuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
orida Statutes, the undersigned, Many And Myszkowiak (Name of Registered Agent)
(Name of Kegistered Agent)
reby resigns as Registered Agent for 11 age of 61en wood Condo (Name of Corporation)
76/8/8
(Document Number, if known)
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 is statement is filed.
John John Marie Land Contract of the Contract
(Signature of Resigning Agent)
signing on behalf of an entity:
(Typed or Printed Name)
A SE SE
(Capacity)
(Capacity)
ECON TRANSPORT
Test & C
Fee for filing this document: \$87.50 - Active corporation
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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

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/