

767600

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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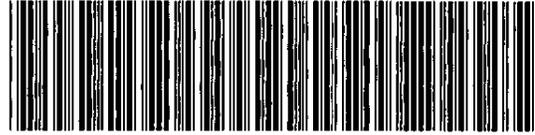
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A. Resignation

TB 12/1/08

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** HARBOR POINTE CONDOMINIUM ASSOCIATION OF DUNEDIN, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** 767600

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:

LEIGH SLEMENT  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State and Zip Code)

**THE PROPERTY GROUP OF  
CENTRAL FLORIDA, INC.  
11902 RACE TRACK ROAD  
TAMPA, FL 33626**

For further information concerning this matter, please call:

LEIGH SLEMENT at ( 813 ) 855-4860  
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

**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, THE PROPERTY GROUP OF CENTRAL FLORIDA, INC.  
(Name of Registered Agent)

hereby resigns as Registered Agent for HARBOR POINTE CONDOMINIUM ASSOCIATION OF DUNEDIN, INC.  
(Name of Corporation)

767600  
(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.

*Leigh Slement*  
(Signature of Resigning Agent)

If signing on behalf of an entity:

LEIGH SLEMENT  
(Typed or Printed Name)

AGENT  
(Capacity)

2008 NOV 25 AM 11:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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