

769672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

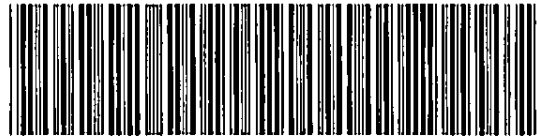
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

4011

Office Use Only



200302875262

08/28/17--01013--008 **87.50

FILED

17 SEP 18 PM 3:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 18 2017

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 29, 2017

ALLEN MYERS
ST. THOMAS SQUARE
8730 THOMAS DRIVE
PANAMA CITY BEACH, FL 32408

SUBJECT: VILLAS OF ST. THOMAS, III, CONDOMINIUM ASSOCIATION, INC.
Ref. Number: 769672

We have received your document for VILLAS OF ST. THOMAS, III, CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 317A00017839

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Villas of St Thomas III Condominium Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: 769672

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:

Allen Myers

(Name of Person)

St. Thomas Square

(Name of Firm/Company)

8730 Thomas Drive

(Address)

Panama City Beach, FL 32408

(City/State and Zip Code)

For further information concerning this matter, please call:

Allen Myers

(Name of Person)

at **404 610-8963**

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

(Name of Registered Agent)

hereby resigns as Registered Agent for Villas of St. Thomas III Condominium Association, Inc.

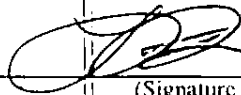
(Name of Corporation)

769672

(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:

(Typed or Printed Name)

(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
17 SEP 18 PM 3:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA