

A17190

Requester's Name

506 Fleming St
Address

Key West, FL 33040
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
500003375435--4
-08/29/00--01008--001
****455.00 ****35.00
2. _____
(Corporation Name) (Document #)
500003375435--4
-09/27/00--01086--003
****52.50 ****52.50
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
00 OCT 16 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Res.

S. PAYNE OCT 18 2000

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

September 14, 2000

Robert A. Spottswood
500 Fleming St.
Key West, FL 33040

SUBJECT: HIGHLANDS BROADCASTING, LTD.
Ref. Number: A17190

We have received your document for (HIGHLANDS BROADCASTING, LTD.) 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):

Enclosed is the correct form to resign as registered agent of a limited partnership. As the fee is \$87.50, an additional \$52.50 is required.

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) 487-6901.

Susan Payne
Senior Section Administrator

Letter Number: 000A00048439

Jaime - 9/22
need check
For \$52.50
From ~~KWH~~ SP
6340
return to Shelley

Thxs



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

October 4, 2000

KEYSTAR, INC.
506 FLEMING STREET
KEY WEST, FL 33040

SUBJECT: HIGHLANDS BROADCASTING, LTD.
Ref. Number: A17190

We have received your document for HIGHLANDS BROADCASTING, LTD. and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The filing fee for resignation of registered agent for a limited partnership is \$87.50. There is a balance of \$35 due.

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) 487-6905.

Thelma Lewis
Corporate Specialist Supervisor

Letter Number: 400A00052707

Spottswood Companies, Inc.
506 Fleming Street
Key West, FL 33040
(305) 294-6100
Fax (305) 294-6122

October 11, 2000

Susan Payne
Sr. Section Administrator
Division of Corporations
Po Box 6327
Tallahassee, FL 32314

Re: Resignation of Agent – Highlands Broadcasting Ltd.
Ref. Number: A17190

Dear Ms. Payne:

We received the attached letter stating that an additional \$35.00 is due for our filing or resignation of registered agent. We have previously paid this amount with our initial filing (we filed on a corporation form instead of a ltd. partnership form). I have attached a copy of the letter stating the Division received the initial payment of \$35.00, thus leaving a balance of \$52.50.

Please file the Resignation of Registered Agent form as we have paid the amount in full. Thank you for your assistance.

Very truly yours,


Shelley Pelcher

/sp
Encl.

**RESIGNATION OF REGISTERED AGENT
FOR A LIMITED PARTNERSHIP**

Pursuant to the provisions of section 620.1051(2), Florida Statutes, the undersigned,

ROBERT A. SPOTTSWOOD

(Name of Registered Agent)

, hereby

resigns as Registered Agent for Highlands Broadcasting, Ltd.

(Name of Limited Partnership)

FILED
00 OCT 16 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A copy of this resignation was mailed to the above listed partnership 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)

FILING FEE: \$ 87.50