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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
В	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECREPACY OF SIATE

DA Rosignation

T BROWN JAN 2 7 2003



Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned, PARACORP, INC.		
(Name of registered agent)		
ereby resigns as Registered Agent for GENERAL RESORT FUNDING & MANAGEMENT, (Name of corporation)		
(take of to-peranon)		
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.		
Don: 310		
(Signature of resigning agent)		
If signing on behalf of an entity:		
DENTSE ZOLINER (Typed or Printed Name)		
ASSISTANT SECRETARY		
(Capacity)		

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314