

F06000002109

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

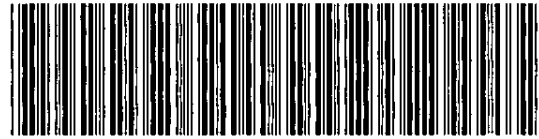
(Business Entity Name)

(Document Number)

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*Resignation
of RA*

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*ARR
11/14/08*

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 11-13-08

NAME: NEW CENTURY REAL ESTATE GROUP, INC.

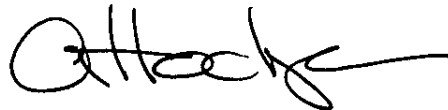
TYPE OF FILING: AGENT RESIGNATION

COST: 35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA0000000015

AUTHORIZATION: ABBIE/PAUL HODGE



COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NEW CENTURY REAL ESTATE GROUP INC.
(Name of Corporation)

DOCUMENT NUMBER: F06000002109

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:

(Name of Person)

(Name of Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

FILED

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

2008 NOV 14 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, FLORIDA FILING & SEARCH SERVICES, INC.

(Name of Registered Agent)

hereby resigns as Registered Agent for NEW CENTURY REAL ESTATE GROUP INCORPORATED

(Name of Corporation)

F06000002109

(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.

Abbie P. Hodge
(Signature of Resigning Agent)

If signing on behalf of an entity:

ABBIE P. HODGE

(Typed or Printed Name)

VICE PRESIDENT

(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