

# N00000002817

\_\_\_\_\_  
(Requestor's Name)

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

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

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

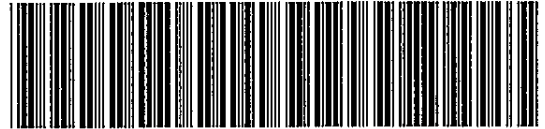
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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04 MAR 19 PM 3:28  
SECRETARY OF STATE  
TALLAHASSEE, FL

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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SEASIDE AT AMELIA ISLAND HOMEOWNERS ASSOCIATION, IN  
(Name of Corporation)

**DOCUMENT NUMBER:** N00000002817

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
(Name of Person)

PROPERTY MANAGEMENT SYSTEMS, INC.  
\_\_\_\_\_  
(Name of Firm/Company)

P.O. BOX 1987  
\_\_\_\_\_  
(Address)

YULEE, FL 32041-1987  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

ANDREW STREET at ( 904 ) 225-9070 x111  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

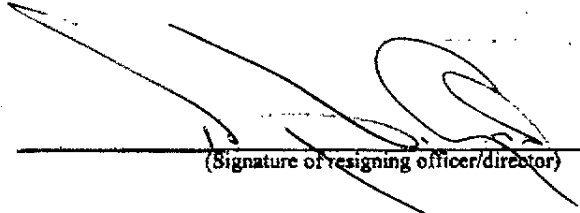
I, DARRYL W. CRISP, hereby resign as PRES & DIRECTOR  
(Title)

of SEASIDE AT AMELIA ISLAND HOMEOWNERS ASSOCIATION, INC.  
(Name of Corporation)

N00000002817 a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

**FILED**  
MAR 19 PM 3:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
3/11/04  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314