

NO10000002305

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

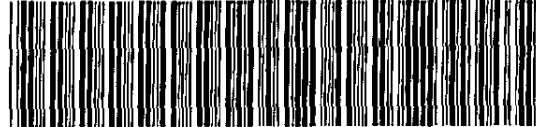
(Business Entity Name)

(Document Number)

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10/10/05--01010--004 **35.00

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05 OCT -7 PM 1:49
CLERK OF STATE
TALLAHASSEE, FLORIDA

T BROWN OCT 17 2005

Officer Resignation

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HILLCREST HEIGHTS CONDOMINIUM ASSOCIATION
(Name of Corporation)

DOCUMENT NUMBER: N01000002305

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

Please return all correspondence concerning this matter to the following:

JOSEPH PELLEGRINO

(Name of Person)

(Name of Firm/Company)

613 HILLCREST STREET

(Address)

ORLANDO/FLORIDA 32803

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH PELLERGINO

(Name of Person)

at (407) 491-6429

(Area Code & Daytime Telephone Number)

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

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
05 OCT -7 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JOSEPH PELLEGRINO, hereby resign as PRESIDENT
(Title)

of HILLCREST HEIGHTS CONDOMINIUM ASSOCIATION, INC.
(Name of Corporation)

N01000002305, a corporation organized under the laws of the State of
(Document Number, if known)


(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