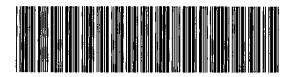
## N01000003121

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(Requestor's Name)	
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(Address)	
(Address)	_
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(City/State/Zip/Phone #)	
(Only) Charles Elph Hollowy	
_	
PICK-UP WAIT MAIL	
•	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	1
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Office Use Only



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C.A. Resign.

6. Contiente DEC 1 2 2007

## **COVER LETTER**

SUBJECT: LIBERTY VILLAGE PR	ROPERTY OWNERS ASSOCIATION, INC. (Name of Corporation)
DOCUMENT NUMBER: N010000	03121
The enclosed Resignation of Registered A	Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
THERESA SUTHERLAND	
(Name of Person)	
SUTHERLAND MANAGEMENT,INC	D.
(Name of Firm/Company	y)
107 N. LINE DRIVE	
(Address)	
APOPKA, FL 32703	
(City/State and Zip Code	e)
For further information concerning this n	natter, please call:
THERESA SUTHERLAND	at ( 407 ) 774-7262, EXT. 101
(Name of Person)	(Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO: Amendment Section

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, THERESA SUTHERLAND
(Name of Registered Agent)
hereby resigns as Registered Agent for LIBERTY VILLAGE PROPERTY OWNERS ASS
(Name of Corporation)
N01000003121
(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.
(Signature of Resigning Agent)
If signing on behalf of an entity:
THERESA SUTHERLAND  (Typed or Printed Name)
(Typed or Printed Name)
PRESIDENT EEF S
(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