

N010000007610

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

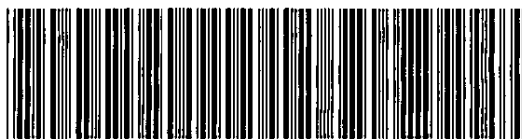
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 AUG 27 AM 10:02

FILED

R.A. Resign.

TB

AUG 28 2009

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ELTON MANOR CONDOMINIUM ASSOCIATION, INC.

(Name of Corporation)

**DOCUMENT NUMBER:** N01000007610

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:

Marie Lachance

(Name of Person)

REGAL PROPERTIES INTERNATIONAL, INC.

(Name of Firm/Company)

1938 Auburn Lakes Drive

(Address)

Viera FL 32955

(City/State and Zip Code)

For further information concerning this matter, please call:

Marie Lachance

(Name of Person)

at ( 321 ) 626-3524

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

**FILED**  
2009 AUG 27 AM 10:02  
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, Regal Properties International, Inc.  
(Name of Registered Agent)

hereby resigns as Registered Agent for Elton Manor Condominium Association, Inc.  
(Name of Corporation)

NO1000007610

(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.

Marie Lechance  
(321) 626-3524

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

☒ Per SUN Biz. org I  
am the only legal  
owner and I did  
not authorize this.

**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**