ND1096

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Certified Copies Certificates of Status

Office Use Only



000291534830

11/10/16--01004--011 **35.00

16 NO 10 NO 9: 05 05 10 10 NO 10 NO

WY 15206 CNCWAIR

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: homes on the park home	owner's association	
(Name of Corporation)		
DOCUMENT NUMBER: NO1096		
The enclosed Officer/Director Resignation for a Corp	oration and fee are submitted for filing	
Please return all correspondence concerning this matt	er to the following;	
denise mckinley		
(Name of Person)		
(Name of Firm/Company)		
4524 old carriage trail		
(Address)		
oviedo, fl 32765		
(City/State and Zip Code)		
For further information concerning this matter, please	call:	
denise mckinley 40	7 ,6250635	
(Name of Person) (Ar	ea 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
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

	DIRECTOR RESIGNATION R A CORPORATION	
, kathleen sylvester	, hereby resign as sec/treas	9. C. T.
homes on the nark	homeowner's association	
01	of Corporation)	•
N01096 (Document Number, if known)	_, a corporation organized under the laws of the State of	
florida		

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