N03000002523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

DEC 5 2012
C. MUSTAIN

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ponza Place Homeowners Association
(Name of Corporation)

DOCUMENT NUMBER: A03000002523

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

Please return all correspondence concerning this matter to the following:

Barbara Torick
(Name of Person)

(Name of Firm/Company)

54 Cedar Circle
(Address)

Boynton Beach FL. 33436
(City/State and Zip Code)

For further information concerning this matter, please call:

Barbara Torick at (561) 433-3397
(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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 26, 2012

BARBARA RUNDBERG TORICK
54 CEDAR CIRCLE
BOYNTON BEACH, FL 33436

SUBJECT: PONZA PLACE HOMEOWNERS' ASSOCIATION, INC.
Ref. Number: N03000002523

We have received your document for PONZA PLACE HOMEOWNERS' ASSOCIATION, INC. and your check(s) totaling $35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

You are not listed as the registered agent for this corporation. However, you are listed as a director/officer. Please find enclosed the correct resignation form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain
Regulatory Specialist II

Letter Number: 712A00028141

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

FILED
12 DEC -5 AM 11:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Barbara Torick, hereby resign as President (Title)

of Ponza Place Homeowners Association (Name of Corporation)

A03000002523 (Document Number, if known), a corporation organized under the laws of the State of

_____.

Barbara Torick
(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