

N03000009090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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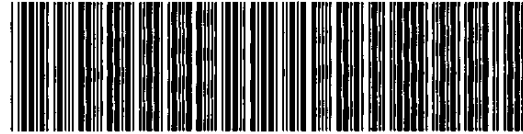
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Thewis  
11-4-10

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** South Ridge of Clermont Homeowners Assn.  
(Name of Corporation)

**DOCUMENT NUMBER:** NO 3000009090

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:

Patti Stevens  
(Name of Person)

Community Management Professionals  
(Name of Firm/Company)

4700 Millenia Blvd, Ste # 515  
(Address)

Orlando, Fl. 32839  
(City/State and Zip Code)

For further information concerning this matter, please call:

Patti Stevens at (407) 455-5950  
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 21, 2010

PATTI STEVENS  
COMMUNITY MANAGEMENT PROFESSIONALS  
4700 MILLENIA BLVD., SUITE 515  
ORLANDO, FL 32839

SUBJECT: SOUTH RIDGE OF CLERMONT HOMEOWNERS' ASSOCIATION,  
INC.

Ref. Number: N03000009090

We have received your document for SOUTH RIDGE OF CLERMONT HOMEOWNERS' ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance of \$52.50 due to file the registered agent resignation.

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) 245-6905.

Thelma Lewis  
Document Specialist Supervisor

Letter Number: 210A00024944

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**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

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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,

Community Management Professionals, Inc.  
(Name of Registered Agent)

hereby resigns as Registered Agent for

South Ridge of Clermont Homeowners Assn.  
(Name of Corporation)

N03 000009090

(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]  
(Signature of Resigning Agent)

If signing on behalf of an entity:

Ron Duprey  
(Typed or Printed Name)

President  
(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**