## N03000010105

(Re	questor's Name)	
(Ad	dress)	
. (Ad	dress)	
(Cit	y/State/Zip/Phon	e #1)
(Oil	y/Otate/Zip/i flori	ο π <i>)</i>
PICK-UP	☐ WAIT	MAIL
(D <sub>1</sub> )	siness Entity Nar	
(bu	siness Enuty ivai	пеј
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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01/20/12--01008--002 \*\*87.50

R.A. Res. 1Brown 1-20-12

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJE	ECT: Regatta Beach Club Condominium Association, Inc.
	(Name of Corporation)
DOCU	MENT NUMBER: N03000010105
The end	closed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Mary	A. White
	(Name of Person)
Quali	fied Property Management, Inc.
	(Name of Firm/Company)
5901	US Hwy. 19, Ste. 7Q
	(Address)
New I	Port Richey, FL 34652
	(City/State and Zip Code)
For furt	ther information concerning this matter, please call:
Mary /	A. White at ( 727 ) 869-9700 Ext. 214
	A. White at ( 727 ) 869-9700 Ext. 214  (Name of Person) (Area Code & Daytime Telephone Number)
Enclose or \$35.0	ed is a check made payable to the Florida Department of State for \$87.50 for an active corporation 00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
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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

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION  Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,		
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned, Qualified Property Management, Inc.  (Name of Registered Agent)		
hereby resigns as Registered Agent for Regatta Beach Club Condominium Association, (Name of Corporation)		
N03000010105		
(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:		
Qualified Property Management, Inc.		
(Typed or Printed Name)		
CEO		
(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