## N03000010486

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
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SECRETARY OF STATE DIVISION OF CORPORATION

10 Mm. Diss. 04/23/04

## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: DR. J.B. CALLAHAN RESIDENT ASSOCIATION, IN
DOCUMENT NUMBER: No30000 10486
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAVID VAN GELDER (Name of Person)
(Name of Person)
(Name of Firm/Company)
P. 0 B 0x 540059 (Address)  ORLANDO FZ 32854,0059
(Address)
ORLANDO FZ 32854,0059
(City/State/and Zip Code)
For further information concerning this matter, please call:
DAVID VAN GELDER at (467) 246-1400 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Ferson) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee \$\begin{align*} \\$\\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & \Bigcup \\$52.50 Filing Fee, \\ Certificate of Status & \Bigcup \\$64ditional copy is \\ enclosed) \end{align*} Certified Copy \( (Additional copy is \\ enclosed) \end{align*}
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines Street

Tallahassee, Florida 32314

Tallahassee, Florida 32399



April 20, 2004

DAVID VAN GELDER P.O. BOX 540059 ORLANDO, FL 32854-0059

SUBJECT: DR. J.B. CALLAHAN RESIDENT ASSOCIATION, INC.

Ref. Number: N03000010486

We have received your document for DR. J.B. CALLAHAN RESIDENT ASSOCIATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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

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) 245-6964.

Letter Number: 604A00026008

Irene Albritton Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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## ARTICLES OF DISSOLUTION

Purstant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation is DR. J. B. CALLAHAN RESIDENT ASS  N 030000	SOCIATION)
N 030000	10486
SECOND: The articles of incorporation were filed on	<del></del> -
THIRD: The corporation has not commenced to conduct its affairs.	
FOURTH: No debts of the corporation remain unpaid.	DIVI 200
FIFTH: Adoption of dissolution (CHECK ONE)  (Note: Cannot be authorized by an incorporator if the corporation has directors)	VISION OF CO
The dissolution was authorized by a majority of the directors:	OF STATE ONS PH 12: 45
The dissolution was authorized by an incorporator.	£5 ONS
The dissolution was authorized by a majority of the incorporators.  Signed this 22 day of 400 400 200 200 200 200 200 200 200 200	
Signature Manhausteld	
(By the Chairman or Vice Chairman of the Board of Directors, President or other officer - if Directors have not been selected by an incorporator.)	<u> </u>
DAVID VAN GELOER Typed or printed name	-
PRES. / DIRECTOR/INCORPORATOR/REG	6 AGT.
/ ruse /	