

N04000008180

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

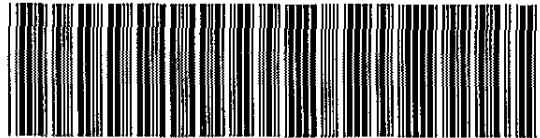
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800066117378

02/23/06--01019--009 \*\*43.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 FEB 23 AM 11:52

B. 3/2/06  
Diss

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DISSOLUTION

**DOCUMENT NUMBER:** NO 4000008180

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIEL R. CRAVEN  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/Company)

3707 W. MCKAY AVE.  
(Address)

TAMPA, FL. 33609-4519  
(City/State and Zip Code)

For further information concerning this matter, please call:

DANIEL R. CRAVEN at ( 813 ) 879-8000  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☒ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

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

FIRST: The name of the corporation as currently filed with the Florida Department of State:

NEW JERSEY TOWNHOMES ASSOCIATION, INC.

SECOND: The document number of the corporation (if known): NO4000008180

THIRD: The file date of the articles of incorporation: 08/20/2004

FOURTH: The corporation has not commenced to conduct its affairs.

FIFTH: No debts of the corporation remains unpaid.

SIXTH: Adoption of Dissolution **(CHECK ONE)**  
(Note: Cannot be authorized by an incorporator if the corporation has directors)

☒ The dissolution was authorized by a majority of the directors:  
OR

☐ The dissolution was authorized by an incorporator.

☐ The dissolution was authorized by a majority of the incorporators.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 FEB 23 AM 11:52

Signature: \_\_\_\_\_

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

DANIEL R. CRAVEN

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

**Filing Fee: \$35**