N04000011842

(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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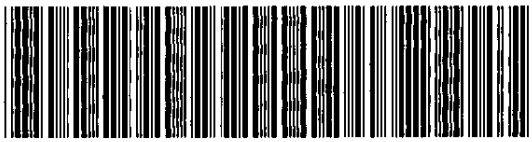

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2010 FEB -8 A 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Resign
Tevis
2-10-10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Goodwill Academies of Southwest Florida, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N04000011842

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:

Michael Shrader
(Name of Person)

Charter School Associates
(Name of Firm/Company)

4300 N University Dr STE C201
(Address)

Sunrise, FL 33351
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Shrader at (954) 414-5767
(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of State for $87.50 for an active corporation or $35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

CR2E046(08/05)

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, Charter School Associates, Inc.
(Name of Registered Agent)

hereby resigns as Registered Agent for Goodwill Academies & Southwest Florida, Inc.
(Name of Corporation)

N04000011842
(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:

Michael Strader
(Typed or Printed Name)

President
(Capacity)

FILED
2000 FEB -8 A 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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