# N05000000787

(Requestor's Name)			
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PICK-UP WAIT MAIL			
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#### **COVER LETTER**

	vision of Corporations
SUBJECT:	:Antilles Vero Beach Homeowners Association. Inc. (Name of Corporation)
DOCUME	NT NUMBER: N05000000787
The enclose	sed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Please retu	irn all correspondence concerning this matter to the following:
Patti F	Ferris
<del></del>	(Name of Person)
Evergre	een Lifestyles Management ELC
	(Name of Firm/Company)
2100 S F	liawassee Rd
	(Address)
Orlando, F	
	(City/State and Zip Code)
For further	information concerning this matter, please call:
Patti Fer	at ( ==-, )
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

### Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509	9.
Florida Statutes, the undersigned, Evergreen Lifestyles Management, LLC	
(Name of Registered Agent)	
hereby resigns as Registered Agent for Antilles Vero Beach Homeowners Association.	Inc.
(Name of Corporation)	-
N05000000787	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known a	iddress.
The agency is terminated and the office discontinued on the 31st day after the date on within statement is filed.	vhich
Patti Ferris	
(Signature of Resigning Agent)	
If signing on behalf of an entity:	
Patti Ferris	2i.
(Typed or Printed Name)	<b>-</b>
	_
Executive Director Support Services	-
(Capacity)	_:
	<del></del>
	9
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withdrawn corporation	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