

N05 000007973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

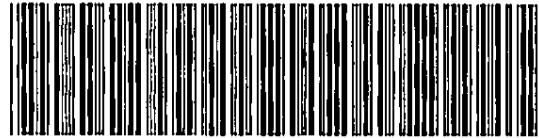
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500381275235

*Resignation of
RA*

02/14/2022 11:01:01 AM +08:00

CLERK OF COURT
CLERK OF COURT

2022 FEB 14 AM 10:04

FILED

A. RAMSEY

FEB 23 2022

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TAMPA BAY DRAGON BOAT CLUB, INC.

(Name of Corporation)

DOCUMENT NUMBER: N05000007973

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:

Donald Bacon, President

(Name of Person)

TAMPA BAY DRAGON BOAT CLUB, INC.

(Name of Firm/Company)

17222 Tiffany Shore Dr

(Address)

Lutz, FL 33549

(City/State and Zip Code)

For further information concerning this matter, please call:

Donald Bacon

at (727) 515-0501

(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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**

FILED

2022 FEB 14 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FL

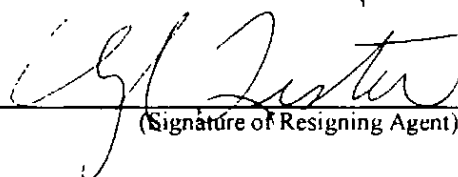
Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Cheryl J Lister
(Name of Registered Agent)

hereby resigns as Registered Agent for TAMPA BAY DRAGON BOAT CLUB, INC.
(Name of Corporation)

N05000007973
(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:

(Typed or Printed Name)

(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