

N06000001635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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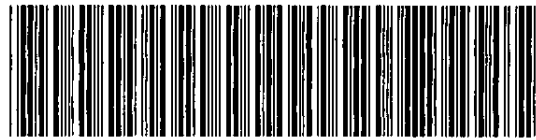
(Business Entity Name)

(Document Number)

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FILED
08 APR 24 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Adm
Dissolved
04/30/08
De

Clifford B. Newton, P. A.
Attorneys at Law

Clifford B. Newton
Jeffrey D. Smith

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April 22, 2008

Secretary of State
State of Florida
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: Crosby Acres Owners Association, Inc.

Dear Sir or Madam:

In connection with the above referenced corporation, enclosed please find the original Articles of Dissolution to be filed with the Secretary of State. I also enclose our firm check in the amount of \$35.00 for the cost of the filing fee.

I enclose a copy of the Articles of Dissolution and would appreciate your stamping and returning the same to me.

Should you have any questions or comments, please do not hesitate to call.

Very truly yours,



Evie Adams, as Assistant to
Clifford B. Newton

:esa
Enclosures

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:

Crosby Acres Owners Association, INC.

SECOND: The document number of the corporation (if known): N06000001635

THIRD: The file date of the articles of incorporation: 02/10/2006

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.

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TALLAHASSEE, FLORIDA

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)

Mark A. Knowles

(Typed or printed name of person signing)

Director/President

(Title of person signing)

Filing Fee: \$35