## N000005072

(Requestor's Name)		
(Address)		
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(Address)		
(City/State/Zip/Phone #)	_	
PICK-UP WAIT MAIL		
(Business Entity Name) .		
(Document Number)		
Certified Copies Certificates of Status		
Certified Copies Certificates of Status	_	
Special Instructions to Filing Officer:		
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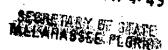
1000 8/18/08

## COVER LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: TERRALAGO OVI	EDU HUMEUWNERS ASSUCIATION, INC.	
	(Name of Corporation)	<del></del>
DOCUMENT NUMBER: NO	600005072	
The enclosed Officer/Director Res	signation for a Corporation and fee are submitted i	for filing
Please return all correspondence co	concerning this matter to the following:	
TODD D. WALKER		
(Name of Pe	rson)	
TODD D. WALKER, P.A.		
(Name of Firm/C	Company)	
P.O. BOX 623275		
(Address	3)	
OVIEDO, FL 32762		
(City/State and Z	Zip Code)	
For further information concerning	g this matter, please call:	
Todd D. Walker	at ( 407 ) 977-1667	
(Name of Person)	at ( <u>407</u> ) <u>977-1667</u> (Area Code & Daytime Telephone N	lumber)
Enclosed is a check for \$35.00 ma	ade payable to the Florida Department of State.	
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327	
Tallahassee, FL 32301	Tallahassee, FL 32314	

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION AUG 13 PM 1...



I. DONALD O. KING	, hereby resign as DIRECTOR
-7	(Title)
of_TERRALAGO OVIEDO HOMEOWNE	·
(Name of Corpor	ation)
N0600005072, a corp	oration organized under the laws of the State of
FLORIDA	
·	

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

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