106000005933

(Requestor's Name)	
(Address)	
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SECRETARY OF SIGNAL AHASSEE

Ra Resignation

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COVER LETTER

Division of Corporations			
SUBJECT: Park Ridge Community Association, Inc.			
(Name of Corporat DOCUMENT NUMBER: N0600005923	ion)		
The enclosed Resignation of Registered Agent for a Corpora	ation and fee are submitted for	filing.	
Please return all correspondence concerning this matter to the	he following:		
(Name of Person) Leland Management (Name of Firm/Company)	- - - <u>3</u> 2		
6972 Lake Gloria Blvd		ECKETA	Т
Orlando, FL 32809-3200	<u>ूर्</u> हम -	5 AM 10: 2	
(City/State and Zip Code) For further information concerning this matter, please call:		*21	*****
Romary Henriquez at (407	982-2866		
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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, Leland Management		
	(Name of Registered Agent)		
hereby resigns s	as Registered Agent for Park Ridge Community Associa	tion, Inc.	
neredy resigns t	(Name of Corporation)		
N0600000	05923		
(Documen	nt Number, if known)		
A copy of this r	esignation was mailed to the above listed corporation at its last know	wn address.	
The agency is to this statement is	erminated and the office discontinued on the 31st day after the date of filed. (Signature of Resigning Agent)	on which SECRETA TALLAHA	7
If signing on be	half of an entity:	3388 - 5	
	Rebecca Furlow	AH IO: 2	
	(Typed or Printed Name)	<u> </u>	
	Agent		
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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