# NO 70000149

(Re	equestor's Name)	
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(Document Number)		
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### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 11, 2011

Hansraj Paleja Antigua Pointe Homeowners Association 1213 Andes Dr. Winter Springs, FL 32708

SUBJECT: ANTIGUA POINTE HOMEOWNERS ASSOCIATION OF POLK

COUNTY, INC.

Ref. Number: N07000001491

We have received your document for ANTIGUA POINTE HOMEOWNERS ASSOCIATION OF POLK COUNTY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey Regulatory Specialist II

HAY 20 PM 12: 9 TRETARY OF STA LAHASSEE, FLOR Letter Number: 611A00011759

# **COVER LETTER**

TO: Amendment Section

Division of Corporations		
SUBJECT: Dissolution	·	
DOCUMENT NUMBER: No 700000 1491		
The enclosed Articles of Dissolution and fee a	re submitted for filing.	
Please return all correspondence concerning this	is matter to the following:	
HAUSRAT PALEJA		
	ontact Person)	
(Firm/Company)		
1213 Anoes or	,	
1213 Anoes of  (Add  Winter Springs f  (City/State a	Horids Brook	
(City/State a	nd Zip Code)	
For further information concerning this matter,		
	at ( 321 ) 689 - 6568	
(Name of Contact Person)	(Area Code & DaytimeTelephone Number)	
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

FILED

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following SECRETARY OF STATE TALLAHASSEE, FLORIDA Articles of Dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: ANTIGNA VOINTE HOME OWNERS ASSOCIATION OF The document number of the corporation (if known): NO 700001491 POIR COMMY, In C. SECOND: THIRD: The file date of the articles of incorporation: **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. 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) (Typed or printed name of person signing) Title of person signing)

Filing Fee: \$35

# **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required	when filing a voluntary dissolution.
Name of Corporation HATI'SUA POINTE HOMEWIEWS	Association of Polk County
Date of dissolution will be the date the dissolution is filed with the Despecified in the <i>Articles of Dissolution</i> .	partment of State or as
Description of information that must be included in a claim:	
MME	
<del></del>	
Mailing address where claims can be sent: (Claims cannot be sent to t	he Division of Corporations)
HAMSEAT PALESTA  1213 AMOES TOT	
1213 AMOES TOY	
Winter spiritys FL	· 32708
A claim against the above named corporation will be barred unless a p within 4 years after the filing of this notice.	proceeding to enforce the claim is commenced
WME	mo
Printed Name of the Person Filing	Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00