

N110000003140

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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*Resignation
to RA*

11/18/13--01057--002 **87.50

FILED
2013 NOV 18 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*MR
11/21/13*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lakewood Shores HOA, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N11000003140

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:

Susie Toniutti

(Name of Person)

JST Property Management LLC.
(Name of Firm/Company)

1795 58th Cir. S.
(Address)

St. Petersburg, FL 33712
(City/State and Zip Code)

For further information concerning this matter, please call:

Susie Toniutti at (727) 366-2758
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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**

FILED
NOV 18 PM 1:37
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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)

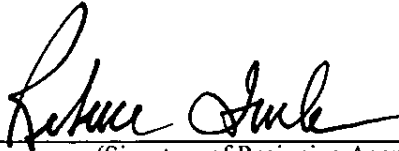
hereby resigns as Registered Agent for Lakewood Shores Homeowners Association, Inc.
(Name of Corporation)

N11000003140

(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:

Rebecca Furlow

(Typed or Printed Name)

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