## N17804

(Re	equestor's Name)	
(Ac	dress)	· ·
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	·
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100101699761

05/07/07--01023--001 \*\*87.50

O7 JUN -5 AN IO: 44
SECRETARY OF STATE
TALL TAHASSES ELOBIO.

TS



## **COVER LETTER**

Division of Corporations
SUBJECT: CYPRESS POINT OWNERS ASSOCIATION. INC. (Name of Corporation)
DOCUMENT NUMBER: N17804
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:
KE(L) BURGESS (Name of Person)
MAKINGE SANDS COUNTRY CLUB, INC. (Name of Firm/Company)
6500 MAKNER SANIOS Dr. (Address)
STVART, FL 34997 (City/State and Zip Code)
For further information concerning this matter, please call:
Kau Bunsess at (772) 283-1119 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 15, 2007

KELLI BURGESS 6500 MARINER SANDS CLUB STUART, FL 34997

SUBJECT: CYPRESS POINT OWNERS ASSOCIATION, INC.

Ref. Number: N17804

We have received your document for CYPRESS POINT OWNERS ASSOCIATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you sent in to resign a registered agent is not correct. This is a Florida Corporation not a Alien business. I am sending you the correct documents to file the resignation.

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) 245-6927.

Tracy Smith Document Specialist

Letter Number: 207A00033869

07 JUN -5 AM 8: 00 NA ISION OF CORPORATIONS

1-850-755-5111

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Fursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, LARRY C. GERSTNEX. (Name of Registered Agent)
nereby resigns as Registered Agent for Cypress Point Owner Association, Manual Composition
(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 his statement is filed.
(Signature of Resigning Agent)
f signing on behalf of an entity:
Typed or Printed Name)
C.O.O.  (Capacity)  ACEC CR
Fee for filing this document:  \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dis

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314