N18301

(Requ	uestor's Name)	<u> </u>		
(Addr	ess)	<u> </u>		
(Addr	ess)			
(City/	State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Busi	ness Entity Nar	ne)		
(Doce	ument Number)			
ertified Copies Certificates of Status				
Special Instructions to Fi	ling Officer:			

Office Use Only



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CÓVER LETTER

Division of Corporations				
SUBJECT: DERBY DOWNS COND	OMINIUM ASSOCIATION	ON, INC.		
SOBJECT	(Name of C	orporatio	on)	
DOCUMENT NUMBER: N18	301			
The enclosed Resignation of Regi	stered Agent for a C	Corporat	ion and fee are submi	tted for filing
Please return all correspondence of	concerning this matt	er to the	e following:	
Lisa Weathers				
(Name of Po	rson)			
Leland Manage (Name of Firm/0				
6972 Lake Glori (Address				
Orlando, FL 3				
(City/State and 2	Zip Code)			
For further information concerning	g this matter, please	call:		
Lisa Weathers	art	107)	781-1404	
(Name of Person)	(Are	a Code d	& Daytime Telephone N	umber)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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:

TO: Amendment Section

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 66	07.0503(2), 617.0502(2), 607.1509, or 617.15	i 0 9.		
Florida Statutes, the undersigned,	Leland Management, Inc.			
	(Name of Registered Agent)			
hereby resigns as Registered Agent for	DERBY DOWNS CONDOMINIUM ASSOCIATION, IN	VC.		
	(Name of Corporation)			
N18301				
(Document Number, if known)				
A copy of this resignation was mailed to	the above listed corporation at its last known	n address.		
The agency is terminated and the office	discontinued on the 31st day after the date on	which		
this statement is filed.	helea Furlow gnature of Resigning Agent)			
(3)	gnature of Kesigning Agent)			
If signing on behalf of an entity:				
	Rebecca Furlow	٠.		
(Typed or Printed Name)	:		
	President	ეგ. 13		
	(Capacity)	= :		
		=:		
		faiil: 13		
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Fee for filing this document:

S87.50 - Active CorporationS35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

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