

442880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

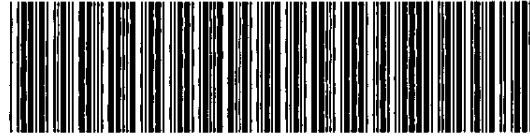
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100218612071

01/18/12--01015--021 \*\*140.00

01/31/12--01014--003 #52.50

FILED  
2012 FEB -1 AM 9:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA  
2-2-12



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 19, 2012

PAUL CORVEY  
HARA MANAGEMENT  
931 S. SEMORAN BLVD, #214  
WINTER PARK, FL 32792-5317

SUBJECT: PORTER PLACE HOMEOWNERS ASSOCIATION, INC.  
Ref. Number: N42880

We have received your document for PORTER PLACE HOMEOWNERS ASSOCIATION, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance due of \$52.50.

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) 245-6908.

Sylvia Gilbert  
Regulatory Specialist II

Letter Number: 612A00001376

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Porter Place Homeowners Association, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** N42880

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:

Paul Corvey  
(Name of Person)

Hara Management  
(Name of Firm/Company)

931 S. Semoran Blvd. #214  
(Address)

Winter Park, FL 32792-5317  
(City/State and Zip Code)

For further information concerning this matter, please call:

Kira Gluckman at ( 407 ) 647-2622  
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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



RECEIVED JAN 23 2012

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

COPY

January 19, 2012

PAUL CORVEY  
HARA MANAGEMENT  
931 S. SEMORAN BLVD, #214  
WINTER PARK, FL 32792-5317

SUBJECT: PORTER PLACE HOMEOWNERS ASSOCIATION, INC.  
Ref. Number: N42880

We have received your document for PORTER PLACE HOMEOWNERS ASSOCIATION, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance due of \$52.50.

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) 245-6908.

Sylvia Gilbert  
Regulatory Specialist II

Letter Number: 612A00001376

RECEIVED

12 JAN 31 PM 10:33

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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, Brett M. Jordan  
(Name of Registered Agent)

hereby resigns as Registered Agent for Porter Place Homeowners Assoc. INC  
(Name of Corporation)

N 42880  
(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]  
(Signature of Resigning Agent)

If signing on behalf of an entity.

Brett M. Jordan  
(Typed or Printed Name)

AGENT  
(Capacity)

FILED  
2012 FEB - 1 AM 9:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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