

N940000002311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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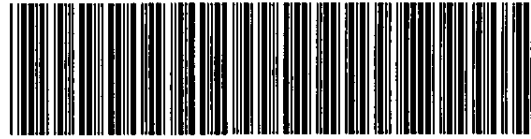
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
12 JAN 20 AM 9:16

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10/20/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SawGrass Village of Timber Greens, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N94000002311

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:

Mary A. White, CEO

(Name of Person)

Qualified Property Management, Inc.

(Name of Firm/Company)

5901 US Hwy. 19, Suite 7Q

(Address)

New Port Richey, FL 34652

(City/State and Zip Code)

For further information concerning this matter, please call:

Mary A. White

(Name of Person)

at (727) 869-9700

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2012

JAN 12 2012

MARY A. WHITE, CEO
QUALIFIED PROPERTY MANAGEMENT, INC.
5901 US HWY. 19, STE. 7Q
NEW PORT RICHEY, FL 34652

SUBJECT: SAWGRASS VILLAGE OF TIMBER GREENS, INC.
Ref. Number: N94000002311

We have received your document for SAWGRASS VILLAGE OF TIMBER GREENS, 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 show the registered agent as QUALIFIED PROPERTY MANAGEMENT, INC.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 712A00000502

**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, Qualified Property Management, Inc.

(Name of Registered Agent)

hereby resigns as Registered Agent for SawGrass Village of Timber Greens, Inc.


(Name of Corporation)

N94000002311

(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:

Qualified Property Management, Inc.

(Typed or Printed Name)

CEO

(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

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DIVISION OF CORPORATIONS
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