00000178 Requester's Name 01 OCT -1 PM 2:57 Address SECRETARY OF STATE City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) -10/02/01--01032--001 (Corporation Name) (Corporation Name) (Document #) (Corporation Name) (Document #) ☐ Walk in ☐ Pick up time Certified Copy Mail out Will wait ☐ Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other Examiner's Initials CR2E031(7/97)



Florida Department of State, Jim Smith, Secretary of State

RESIGNATION OF OFFICER AND/OR DIRECTOR JALLAHASSEE, FLORIDA

AFFIDAVIT

STATE OF	FLORIDA	· · · · · · · · · · · · · · · · · · ·			<u>.</u>	·
COUNTY OF	BREVARD		· · · · · ·			en e
BEFORE	ME,	the	undersigned	authority,	personally	
MIKE WILI	IAMS		, who	by me being	first duly swor	n says to
the best of	his		know	rledge, information	on and belief,	and under
penalties of pe				Ì	. *	
1. That	he	ha	is resigned as a	Directo	r	of the special states
FOUNDA!	TION PARK	PROPERTY	OWNERS ASSO	(Title) OCIATION, INC.	, a Florida corpora	tion;
		(Name of C	Corporation)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
 That the That corp FURTHER AF 	oorate minute	es relating t	to the resignatio	of the resignation n are unavailable.		;
Sworn to and	subscribed b	efore me th	is <u>29</u> 4n	AFFIANT _day of _ Augu: _ler Q. Sale	st	,2001.
My Commission			O NO	TARY PUBLIC	JENNIFER A. S./ MY COMMISSION # EXPIRES: July Bonded Thru Notary Pub	CC 758121

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 (904) 487-6051