(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:	
, opens,	

Office Use Only



300116632313

Mognation 7 02/05/08-01001--006 **140.00

08 FEB -4 PH 3: 04

COVER LETTER

Division of Corporations HARTSFIELD TOWNHOMES HOMEOWNERS ASSOCIATION, INC SUBJECT: (Name of Corporation) N99000001530 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SHERRI BEEMAN (Name of Person) SMITH THOMPSON SHAW & MANAUSA, P.A. (Name of Firm/Company) 3520 THOMASVILLE ROAD, 4TH FLOOR (Address) TALLAHASSEE, FLORIDA 32309 (City/State and Zip Code) For further information concerning this matter, please call: SHERRI BEEMAN (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for \$35.00 made payable to the Florida Department of State. **Street Address:** Mailing Address: Amendment Section Amendment Section

Division of Corporations

Post Office Box 6327 Tallahassee, FL 32314

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED

08 FEB -4 PM 3: 18

SECRETARY OF STATE TALLAHASSEE, FLORIDA

I, STEPHEN J. KYNIO	, hereby resign as DIRECTOR	
	(Title)	
of HARTSFIELD TOWNHOMES HOMEOWNERS ASSOCIATION, INC.		
(Name of Corporation)		
N9900001530 , a co	rporation organized under the laws of the State of	
FLORIDA		
	Kom	

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

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