

N9900003236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

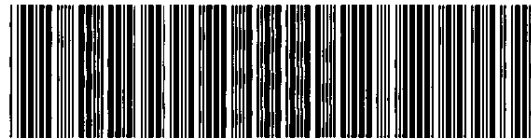
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATE AFFAIRS
10 JUL -9 PM 1:32

R.A. Resign
C.COULLIETTE

JUL 09 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cypress Springs Estates Homeowners Assoc. Inc.
(Name of Corporation)

DOCUMENT NUMBER: N99000003236

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Beth Palmer
(Name of Person)

PROPERTY FIRST Inc.
(Name of Firm/Company)

221 Walton Heath Dr.
(Address)

Orlando FL 32792
(City/State and Zip Code)

For further information concerning this matter, please call:

Beth Palmer at (407) 282-6795
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 23, 2010

BETH PALMER
PROPERTY FIRST INC
221 WALTON HEATH DR
ORLANDO, FL 32792

SUBJECT: CYPRESS SPRINGS ESTATES HOMEOWNERS ASSOCIATION,
INC.

Ref. Number: N99000003236

We have received your document for CYPRESS SPRINGS ESTATES HOMEOWNERS ASSOCIATION, INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You have sent the form for an officer/director resignation and you are trying to resign as registered agent. You need to complete the correct form and put the name "Property First Inc" in the area for the resigning agent, not Beth Palmer. You also need to show the corporate name as referenced above, not abbreviated as you had on the application.

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) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 010A00015511

RECEIVED
JUL 8 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cypress Springs Estates HOA, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N9900000 B236

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:

Beth Palmer
(Name of Person)

Property First Inc
(Name of Firm/Company)

221 Walton Heath Dr.
(Address)

Orlando, FL 32828
(City/State and Zip Code)

For further information concerning this matter, please call:

Beth Palmer at (407) 282-6795
(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

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0507(2), 617.0507(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Property First, INC.
(Name of Registered Agent)

hereby resigns as Registered Agent for Cypress Springs Estates Home
(Name of Corporation)

NA000003236
(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.

Beth Palmer
(Signature of Resigning Agent)

If signing on behalf of an entity:

Beth Palmer
(Typed or Printed Name)
Registered Agent
(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

10 JUL -9 PM 1:32
DIVISION OF CORPORATIONS
STATE DEPT OF FLA