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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Ho Co CORPORATION OF SW Florida (Name of Corporation)
DOCUMENT NUMBER: POOOOOS8161
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:
DORSEY D. QUANCT (Name of Person)
5736 CONCORD DR (Name of Firm/Company)
NORTH PORT FL 34287 (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
DOROTHY M. BENNETT at (941) 639-1142 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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, Dorothy M BENNETT (Name of Registered Agent)
hereby resigns as Registered Agent for HoCo Corporation OF SW FLORIDA (Name of Corporation)
P 000 000 88 1 6 1 (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. Country Count
If signing on behalf of an entity: (Typed or Printed Name) (Typed or Printed Name) (Typed or Printed Name)
(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withdrawn corporation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